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ABSTRACT

This report describes results of Project TEEN, a 1-year federal grant project awarded to the Louisiana State Department of Education for the purpose of conducting a state assessment of compliance with Title IX and related to middle and secondary school dropouts among pregnant female adolescents. Other stated purposes of the project include assessment of educational offerings available to pregnant minors and the development of model survey and questionnaire instruments. This document discusses: (1) the economic impact of adolescent pregnancy in Louisiana with statistics concerning live births to teenagers; (2) family awareness and youth responsibilities with statistics concerning out-of-wedlock births to teenagers; (3) teenage pregnancy and its impact on dropping out of school with statistics concerning estimated numbers of pregnant students; (4) the health costs of teenage pregnancy for the mothers and babies with statistics concerning infant deaths categorized; and (5) availability of support services and unmet service needs such as child care with statistics concerning desired services. Recommendations by the Project TEEN Task Force are provided, focusing on the role of schools and the need for support services. The appendix includes Project TEEN questionnaires for mothers and fathers and data tables from the project. (ABL)

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PROJECT TEEN REPORT ON ADOLESCENT PREGNANCY AND SCHOOL DROPOUTS IN LOUISIANA

December 1987

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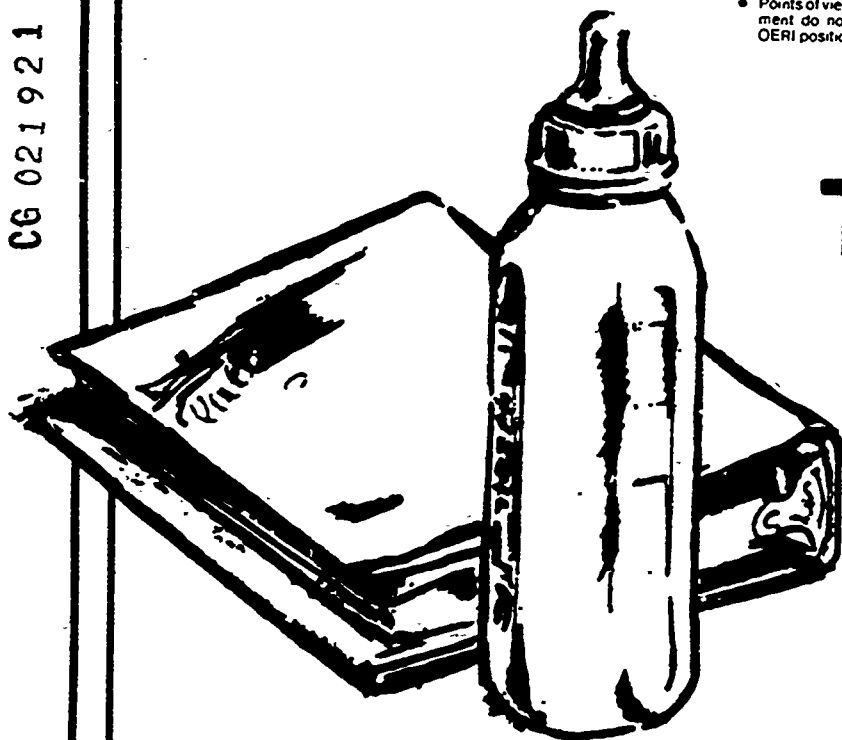
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**Teenage
Equity
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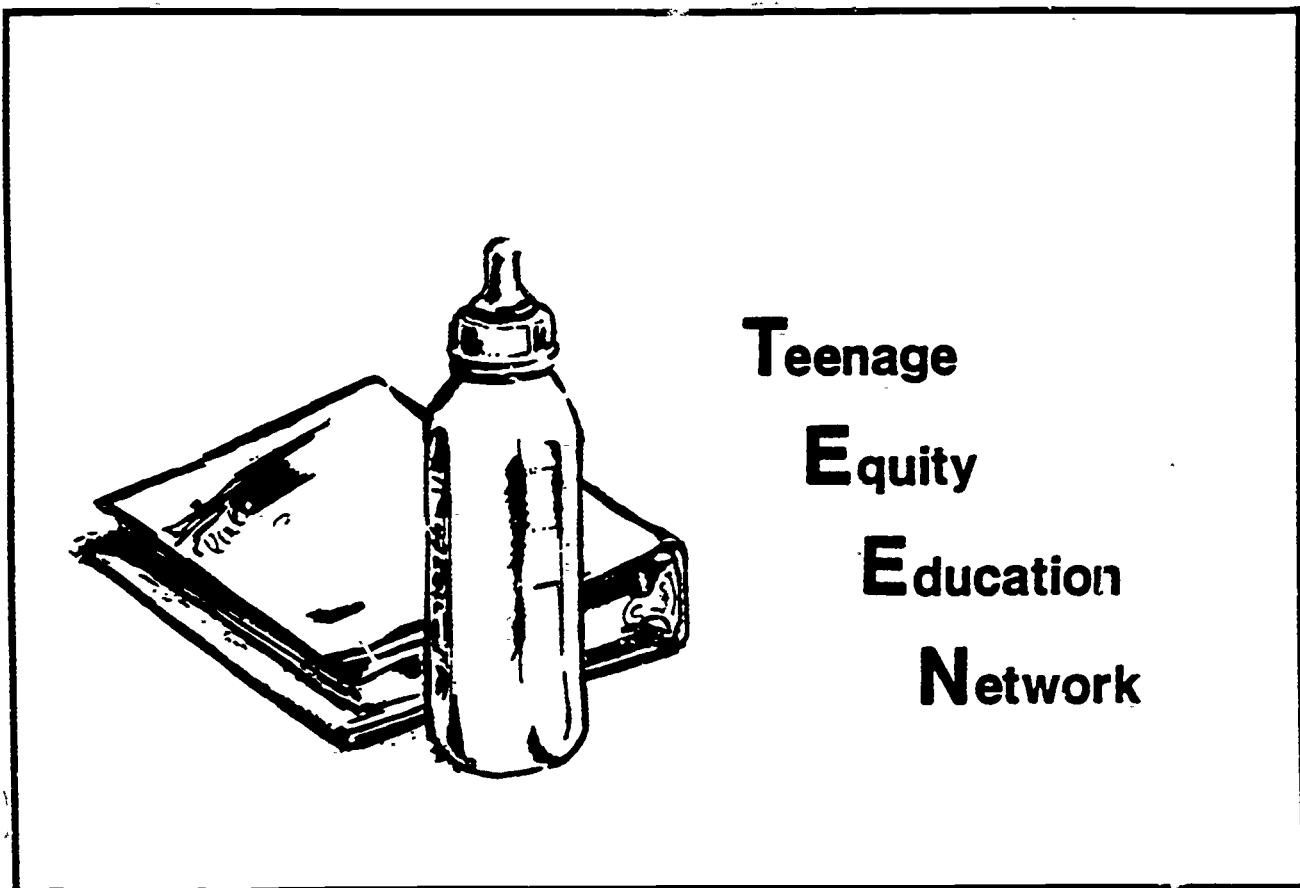
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PROJECT TEEN

REPORT AND RECOMMENDATIONS ON ADOLESCENT PREGNANCY/SCHOOL DROPOUTS IN LOUISIANA



**Teenage
Equity
Education
Network**

**Developed by the Project Teen Staff and Task Force Members
Federal Grant Project, Title IX-Women's Educational Equity
Assistance Program**

December 1987

FORWARD

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Report and Recommendations on Adolescent Pregnancy/
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EXECUTIVE SUMMARY

Project TEEN was a one year federal grant project awarded to the Louisiana State Department of Education to conduct a state assessment of the state's sixty seven (67) public school systems to determine what current Louisiana school systems' policies and procedures are concerning Title IX compliance, as related to middle and secondary school dropouts among females who become pregnant.

The purpose of PROJECT TEEN was threefold: first, to assess the state's school systems as to the current policies and procedures concerning Title IX compliance related to dropouts among females who become pregnant, second, to assess the educational offerings available to pregnant minors, and third, to develop model survey and questionnaire instruments.

Title IX prohibits schools from discriminating against pregnant students, whether they are married or unmarried. Also, institutions cannot discriminate against a student because of childbirth, false pregnancy, termination of pregnancy, or recovery from these conditions. This federal regulation prohibits sex discrimination in classes, programs, and extracurricular activities.³

The data from this state assessment will provide the necessary information for the Department of Education to coordinate and implement dropout prevention programs for pregnant minors, teenage mothers, and the responsible fathers.

Adolescent pregnancy has always been a problem in Louisiana; but only recently has the pervasiveness, implications of the social costs, and the impact on the present and future of economics and human development become widely appreciated. Dramatic impact exists for, not only the individual teen and her family, but for every member of society. As we have now come to realize the loss of human potential to society resulting from Louisiana's high rate of adolescent pregnancy, it is clear that this problem demands an immediate commitment and action. Educators, civic and community leaders, service providers, families, public and private agencies, religious groups, taxpayers, business and labor and state and local governments must unite for effective confrontation of adolescent pregnancy and its problems. More than sixteen (16) percent of all Louisiana's babies are born to adolescents. We continue to have the third highest rate of teen pregnancy in the nation. The severity of this number is emphasized by the comparison with the national rate of 13.7 percent.⁷

The more than one million teenage pregnancies that occur in the United States each year are a severe problem for all of society. More than one in 10 girls age 15 to 19 gets pregnant. Across Louisiana, about 16,090 babies a year are born to teenagers; this places the state third, after Mississippi and Wyoming, in its rate of births to teenage mothers, as reported by the Alan Guttmacher Institute, a New York-based group that conducts family planning research.⁸

From the 5,000 Project TEEN questionnaires disseminated to Teen Mothers/Fathers in the 67 Louisiana parish/city middle and secondary school systems, parish health units, charity hospitals, maternity homes and adoption agencies, this report will concentrate on the four major areas. The four major areas are Family Awareness and Youth Responsibility, Education, Health and Support Services. In this report these four areas affecting adolescent/teen pregnancy in Louisiana will be discussed, so as to understand the effects of teen pregnancy.

An important footnote to better understand the severity of the teenage pregnancy problem in Louisiana is to realize that the youngest mother who participated in this project was not a teenager. She was 9 years of age from East Baton Rouge parish. The youngest fathers who participated in this project were 13 years of age. These two teen fathers were from Rapides Parish, father of two, and the other teen father of 13 was from St. Tammany Parish.

The family is a vital component in addressing this problem and parent child communications are essential. Parents must educate their child about the equal responsibility for the consequences of sexual activity, also, parents must accept the responsibility for instilling values and promoting positive self-esteem. In addition to teaching their children the importance of self worth, it is also vital for parents to reinforce the development of decision making skills.

It seems that because of the lack of information and communication the burden falls upon the school, since the schools have the greatest amount of time and contact with the children of our state. Their efforts must be supported and directed toward providing much needed alternatives to prevent dropouts, to provide specialized career development programs and to teach parenting and refusal skills.

There is a crucial need for support services to address the special needs of adolescents and teens in order for them to become productive citizens. There is a dire shortage of comprehensive programs in Louisiana directed at meeting the needs of adolescents and teens. Coordination and planning should include educators, business leaders, school nurses, guidance counselors, and nutritionists for programs that address the special needs of teen parents.

During the first three months of pregnancy, seven out of ten pregnant teenagers do not see a doctor or go to a clinic. Teenagers have poor eating habits, smoking, and with the use of alcohol and drugs these factors increase the risk of having a baby with health problems.

A few of the consequences of adolescent pregnancy are the discontinuation of education, lack of prenatal care resulting in low birthweight infants, infant mortality, and repeat pregnancies. In addition to the health and education consequences of adolescent pregnancy there are higher incidences of drug and alcohol abuse, unemployment and a longer dependency on the welfare system.

Leadership will have to be provided from all areas and from all levels in Louisiana in order to break the disruptive cycle of children having children.

INTRODUCTION

Teenage Pregnancy - Whose problem is it? Why should we be concerned about it?

In 1986, over one million babies were born to teenagers in the United States. Adolescent pregnancy and early childbearing have emerged as a problem of enormous implications and proportions. The tragedy of early childbearing is that it can short-circuit the teenager's life. Adolescent mothers have a higher-than-average dropout rate from school, therefore, limiting their career opportunities. Louisiana contributes substantially to this national scene. In 1986, Louisiana had 13,115 live births to women and girls under the age of 20. Over 65% of these births were out of wedlock births.

Consider the aforementioned statistics in terms of human lives in Louisiana. On the individual level, these figures indicate that many of these teens have foreclosed on an array of life opportunities for themselves and their offspring.

In 1986, the Louisiana State Department of Education was awarded a one year federal grant project to assess the state of Louisiana's 67 parish and city educational systems' policies and procedures regarding Title IX compliance related to females who become pregnant in middle and secondary schools.

In this one year federal grant project a Task Force was formed composed of a neonatologist, school nurses, parents, teen mothers, pediatrician, child welfare and attendance personnel, guidance counselors, Louisiana Board of Elementary and Secondary Education members, and community and relevant state agency personnel.

This Task Force was established to assist in the development of the model survey instruments that were disseminated to the 67 Louisiana parish/city school Superintendents, and the Project TEEN questionnaires. The Task Force was organized into four sub-committees, addressing the following areas: Awareness, Education, Health, and the Economic Impact of adolescent pregnancy affecting Louisiana.

I. AWARENESS:

- A. To improve the community awareness about the effects of adolescent pregnancy on the state.

II. EDUCATION:

- B. To determine Louisiana's 67 parish and city educational systems' current policies and procedures regarding Title IX compliance as related to females who become pregnant in the middle and secondary schools.

III. HEALTH:

- C. To determine the health status of childbearing teens and their babies and provide instruction about good prenatal care and nutritional programs for adolescents and teens.

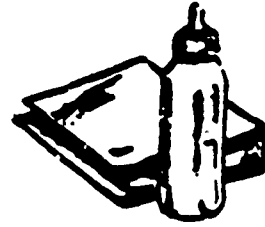
IV. ECONOMIC IMPACT:

- D. To determine what the impact of teen pregnancy and early childbearing has on the economy of Louisiana and to make recommendations to minimize the negative impact.

There are a number of myths that surround teen pregnancy. It is commonly believed that only the poor and minorities become pregnant during adolescence. However adolescent pregnancy occurs in urban and rural settings and among all ethnic backgrounds. Although the percentage of teenage pregnancy is high among blacks and hispanics, it is also important to note that the percentage of white teens giving birth in the United States is higher than any other developed country in the world.⁵

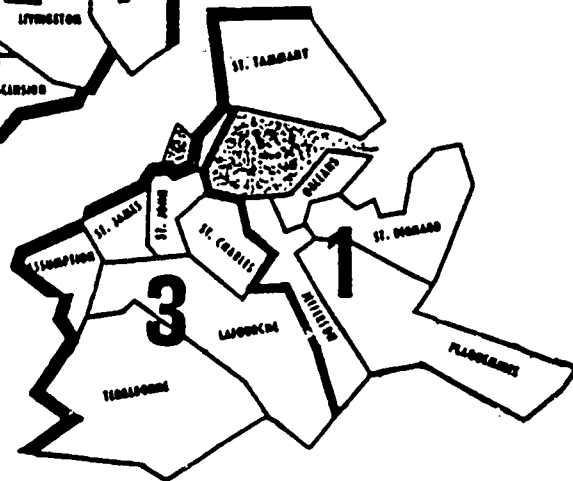
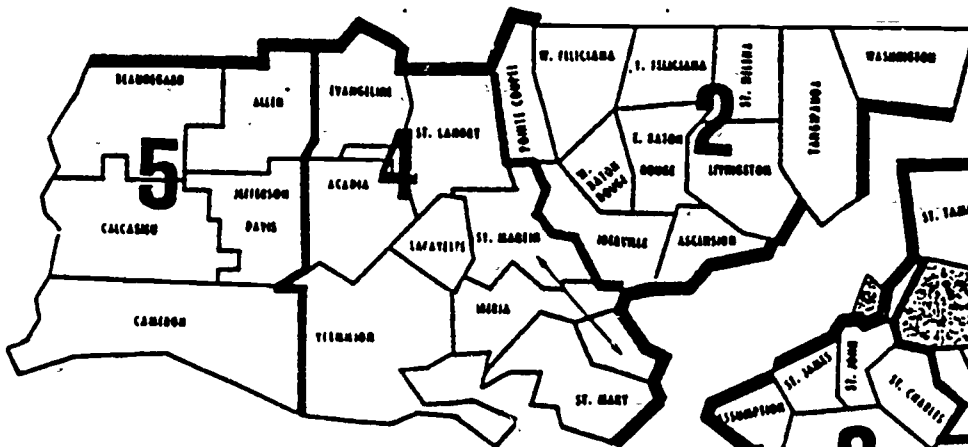
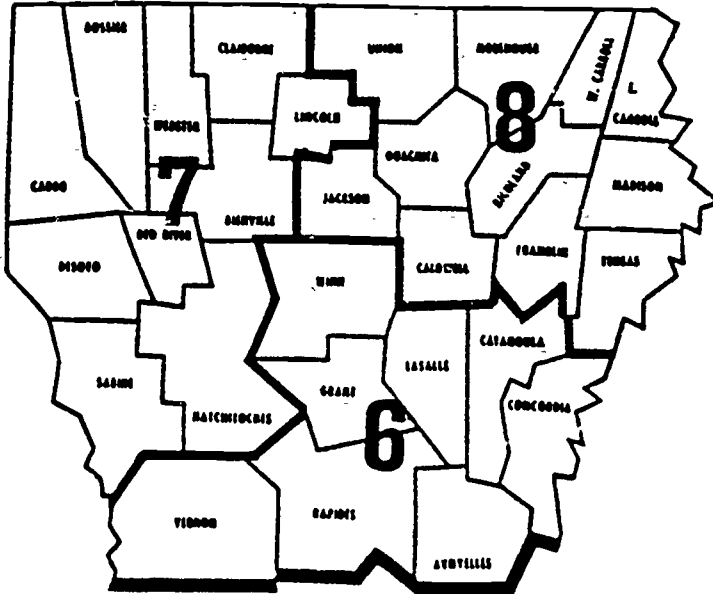
In Louisiana the racial percentage of adolescent pregnancy is 60% non white/40% white. In comparing the 1985 and 1986 Live Births of teens the pregnancy rates are decreasing among the age group of 15-19, but increasing among the under 15 age group giving birth. Adolescent pregnancy is a multifaceted and controversial problem in Louisiana. When conflicting societal and cultural messages are working together, then the statistics reflect this dilemma of unrealistic ideas about parenting and adolescent pregnancy is often a result.

The Project TEEN Task Force recommends that a successful collaboration and coordination of services to the pregnant and parenting adolescents needs to be developed in this state. Support of teen parents efforts to continue their education needs to be implemented into the Louisiana school systems and community agencies.



LOUISIANA STATE PLANNING DISTRICTS

1986
TEENAGE LIVE BIRTHS
OF
LOUISIANA RESIDENTS
BY
8 STATE PLANNING DISTRICTS



LIVE BIRTHS - 1986
LOUISIANA 8 STATE PLANNING DISTRICTS

	15	15-19
*SPD 1	104	3,178
*SPD 2	56	2,098
SPD 3	24	928
*SPD 4	29	1,714
SPD 5	18	750
SPD 6	32	1,053
*SPD 7	84	1,828
SPD 8	60	1,159

ECONOMIC IMPACT OF ADOLESCENT PREGNANCY

Adolescent pregnancy is costly to Louisiana in both human and fiscal terms. In 1986, 383 out of wedlock babies were born to adolescents under the age of 15 and 8,176 out of wedlock babies were born to teens aged 15 to 19 years. Another 6,556 babies were born to married teens in 1986. Babies born to teenagers are twice as likely to die before their first birthday as babies born to mothers aged 20 through 29. In 1986, the infant mortality rate was 11.9% deaths per 1,000 live births. The national rate of infant mortality is 10.4%. It is estimated that three times the number of babies who die live with permanently handicapping conditions, many which could have been prevented. It costs the state an estimated \$955,550 to provide a lifetime of care for one severely handicapped child.⁴

A family begun by a first birth to a teenage mother in 1986 will cost the taxpayer an average of \$14,852 by the time that baby reaches age twenty. If this birth had been delayed until the mother was in her twenties, the United States would have saved \$5,941. Babies born to mothers under 15 average \$18,913; babies born to mothers aged 15 to 17 average \$18,897; babies born to older teens average \$11,984. These figures include AFDC, Medicaid, Food Stamps and public housing and social service costs.¹

These figures may seem low but they are the average costs of families begun by teen births. Two out of three teen mothers do not receive public assistance, thus the average cost of a single birth to a teen who DOES receive welfare is estimated to be \$37,500 for a single year.¹

In 1986, the United States spent \$17.93 billion on all families that were begun when the mother was a teenager. This figure includes public outlays for Aid to Families with Dependent Children, (AFDC), Medicaid, and Food Stamps for families begun by a teen birth. It includes direct payments to service providers, and the administrative costs of these programs.¹

1986, National Estimate of Public Outlays in Teenage
Childbearing (1986 Single Year Cost).⁴

FUNDING SOURCE	TOTAL OUTLAY OF AFDC RECIPIENTS	OUTLAY ATTRIBUTED TO TEENAGE CHILDBEARING
AFDC	17.92	9.49
Food Stamps	5.33	2.82
Medicaid	10.62	5.62
Total for Teenage Childbearing		<u>17.93</u>

1. Includes administrative costs.

2. Based on the assumption that families begun by a teen birth
consume 53 percent of these funding sources.

The above figures represent minimal public costs since they
do not include other services such as housing, special education
services, child protection services, foster care, daycare and
other social services.⁴

In 1986, Louisiana spent \$441,644,779 on families that were
begun when the mother was a teenager in Aid to Families with
Dependent Children, Food Stamps, and Medicaid costs.⁴

SINGLE BIRTH COSTS

A family begun by the first birth to a teenager aged 14 or younger in 1986 in Louisiana will cost the public \$14,715 over the next 20 years.⁴

A family begun by the first birth to a teenager aged 15-17 in 1986 in Louisiana will cost the public \$14,649 over the next 20 years.⁴

A family begun by the first birth to a teenager aged 18-19 in 1986 in Louisiana will cost the public \$9,302 over the next 20 years.⁴

1986-2006

LOUISIANA

TEENAGE PREGNANCY COSTS

AGE 14	15-17	18-19
\$14,715	14,649	9,302

Louisiana has a population of 3.5 million. It is one of the southern states which is now experiencing the highest rate of unemployment, illiteracy, and ranks as one of the nation's poorest states with a percentage of 18.6 of its families living below the national percentage of 12.4. 11

In Louisiana, 22% of all babies are born to women who do not receive early prenatal care. Of the babies born in Louisiana 9% are born at low birthweight, making them 20 times more likely than the normal weight infants to die before their first birthdays. Financially 59% eligible women, infants and children in Louisiana do not receive any WIC government nutritional supplemental assistance programs. 11

In Louisiana 40% of teen births are to women who do not receive early prenatal care. Of the babies born to teens in Louisiana, 12% are low birthweight babies.

The monthly AFDC urban benefit for a family of three in Louisiana is \$190, which is 25% of the federal poverty level, and only 32% of the state's own standard of need. Louisiana ranks 48th in the payment standard for a family of two in the nation regarding AFDC payments. 11

One out of every twenty (20) Louisiana residents receives AFDC. Of the 256,000 AFDC recipients, 179,200 (70%) are children. Nearly all (95.5%) of these children are in families headed by a female. The average age of these mothers is 31 years of age. 11

In addition to the AFDC, Medicaid, and food stamps programs for teen mothers, the WIC program offers additional benefits for women and infants. The goal of the nationwide special supplemental Food Program for women, infants and children, WIC, is to provide supplemental foods and nutritional education through local agencies to eligible persons. 11

The main objective of the Louisiana WIC program is to improve the health and nutritional status of all low-income pregnant, post partum and lactating women. Infants and children in Louisiana who are at nutritional risk through health services intervention, and need supplemental food and nutritional education are also provided. 13

In recognition of the important role that nutrition plays in the health of young children and pregnant women, Congress in 1972 enacted legislation creating a major nutritional intervention program. The WIC program has since grown into a national program that benefits over 1.3 million women and children at an annual cost of \$750 million. 13

Adolescent childbearing requires a high expenditure of public funds. The need for support programs for teenage mothers and their children are essential in order to provide for their health and well being. If programs were developed and implemented at preventing adolescent pregnancies, perhaps the potential to decrease the public costs would aid the state and the nation.

PROJECT T.E.E.N.
STATE OF LOUISIANA
DEPARTMENT OF EDUCATION

LIVE BIRTHS TO TEENAGERS BY RESIDENCE, 1986²

RESIDENCE	AGE OF MOTHER		ALL AGES	% OF BIRTHS OF TEEN MOTHERS
	<15 YRS.	15-19 YRS.		
ACADIA	3	207	1,081	19%
ALLEN	1	76	326	23%
ASCENSION	4	157	1,141	14%
ASSUMPTION	1	48	428	11%
AVOUELLES	2	126	687	18%
BEAUREGARD	3	100	542	19%
BIENVILLE	2	40	247	17%
BOSSIER	8	241	1,701	14%
CADDO	52	931	4,792	20%
CALCASIEU	11	455	2,894	16%
CALDWELL	0	35	176	19%
CAMERON	1	32	170	19%
CATAHOULA	0	31	172	18%
CLAIBORNE	3	43	232	20%
CONCORDIA	2	96	370	26%
DESOTO	3	104	492	21%
EAST BATON ROUGE	25	917	6,832	13%
EAST CARROLL	4	65	243	28%
EAST FELICIANA	1	54	340	16%
EVANGELINE	4	148	696	21%
FRANKLIN	4	91	394	24%
GRANT	2	53	273	14%
IBERIA	7	240	1,414	17%
IBERVILLE	7	112	646	18%
JACKSON	2	49	213	24%
JEFFERSON	29	924	7,445	12%
JEFFERSON DAVIS	2	87	558	16%
LAFAYETTE	4	358	3,280	11%
LAFOURCHE	7	257	1,563	16%
LASALLE	3	59	228	27%
LINCOLN	4	97	594	17%
LIVINGSTON	2	208	1,228	17%
MADISON	14	67	281	28%
MOREHOUSE	3	140	501	28%
NATCHITOCHES	4	121	613	20%
ORLEANS	67	1,766	10,053	18%
OUACHITA	26	478	2,511	20%
PLAQUEMINES	2	99	567	17%
POINTE COUPEE	2	63	415	15%
RAPIDES	17	395	2,282	18%
RED RIVER	0	43	175	24%

RESIDENCE	AGE OF MOTHER		ALL AGES	% OF BIRTHS OF TEEN MOTHERS
	<15 YRS.	15-19 YRS.		
RICHLAND	3	78	409	19%
SABINE	3	83	373	23%
ST. BERNARD	2	161	1,075	15%
ST. CHARLES	4	107	872	12%
ST. HELENA	1	28	172	16%
ST. JAMES	2	56	405	14%
ST. JOHN	3	98	879	11%
ST. LANDRY	8	270	1,616	17%
ST. MARTIN	1	131	889	14%
ST. MARY	2	223	1,221	18%
ST. TAMMANY	4	228	2,404	9%
TANGIPAHOA	8	346	1,693	20%
TENSAS	0	25	137	18%
TERREBONNE	7	362	1,982	18%
UNION	4	80	319	26%
VERMILION	0	137	924	14%
VERNON	2	235	1,440	16%
WASHINGTON	6	138	703	20%
WEBSTER	5	125	632	20%
WEST BATON ROUGE	0	53	399	13%
WEST CARROLL	0	51	199	25%
WEST FELICIANA	0	22	150	14%
WINN	4	58	255	24%
T O T A L S	407	12,708	77,944	16%

* These figures are from the 1986 Live Births by parish of the Louisiana residents; provided by the Public Health Statistics, Department of Health & Human Resources, Office of Preventive & Public Health Services. The % of Births of Teen Mothers was calculated by the Project TEEN staff at the Louisiana State Department of Education.²

Family Awareness and Youth Responsibilities

Teenage pregnancy can happen in any family, anywhere. Society then needs to ask itself why are our teens and adolescents becoming pregnant in such large numbers and at such a young age?

It is apparent that self-esteem and self-confidence play very important roles in teen sexual behavior. A teen with low self-confidence finds it very difficult to say "NO" to pressure from a boyfriend or girlfriend. 5

Many teens have very stormy relationships with their parents. Having sex may be a way to rebel against parents. Having a baby may be seen as a way to become independent or to overcome objections to a boyfriend or girlfriend. 5

In the Project TEEN data findings of the 5,000 questionnaires that were disseminated to the 67 Louisiana middle and secondary school systems, the response from questions #1, #8 and #17 regarding the communication between the child and parent about their pregnancy and their major source of sex education was astonishing. The overwhelming response was peers as a major source of sex information and an inability to communicate with parents about their pregnancy and other matters regarding sex.

Many parents are not comfortable discussing sex with their children; therefore, teens may not get the guidance and emotional support they need from their families.

The family environment is the first foundation in a child's life planning development. Positive self-esteem is viewed as a key to a child's successful ability to make decisions to his advantage and in processing the necessary information to deal with the world around him. Families in which communication is open, where there is no abuse, and where there is generally a healthy, happy parent and child relationship are at less risk for premature relationships.

Helping parents to improve their communication with their pre-teen and teenage children so that they can communicate with their children is of the utmost importance.

Although teenage pregnancy most often is considered "female concerns," teenage males must not be overlooked. Their motivations for early sexual activity and parenthood often parallel those of young women, and their needs for guidance and affirmation also needs to be addressed through academic or vocational success rather than too early parenthood.

In order for teens to begin a successful preparation for entering adulthood, teens must be equipped with positive self-esteem, self motivation, employment skills, decision making skills, education, and most of all the knowledge that the responsibility for their behavior rests upon them.

PROJECT T.E.E.N.
STATE OF LOUISIANA
DEPARTMENT OF EDUCATION

OUT OF WEDLOCK BIRTHS TO TEENAGERS BY RESIDENCE, 1986 ²

RESIDENCE	AGE OF MOTHER		ALL AGES	% OF BIRTHS TO TEEN MOTHERS
	<15 YRS.	15-19 YRS.		
ACADIA	2	105	293	36%
ALLEN	1	35	67	53%
ASCENSION	4	96	269	37%
ASSUMPTION	1	30	115	26%
AVOUELLES	2	59	206	29%
BEAUREGARD	2	35	89	41%
BIENVILLE	2	26	76	36%
BOSSIER	6	123	347	37%
CADDO	50	673	1,798	40%
CALCASIEU	10	263	657	41%
CALDWELL	0	14	42	33%
CAMERON	0	11	27	9%
CATAHOULA	0	16	51	31%
CLATBORNE	3	37	90	44%
CONCORDIA	2	63	152	42%
DESOTO	3	71	189	39%
EAST BATON ROUGE	24	657	1,957	43%
EAST CARROLL	4	55	149	39%
EAST FELICIANA	1	42	119	36%
EVANGELINE	4	76	199	40%
FRANKLIN	4	60	162	39%
GRANT	2	21	67	34%
IBERIA	7	161	442	38%
IBERVILLE	7	84	277	32%
JACKSON	2	22	65	36%
JEFFERSON	28	584	1,707	35%
JEFFERSON DAVIS	2	39	143	28%
LAFAYETTE	4	223	687	33%
LAFOURCHE	6	119	354	35%
LASALLE	2	27	43	37%
LINCOLN	2	55	162	35%
LIVINGSTON	2	82	182	46%
MADISON	14	55	183	37%
MOREHOUSE	3	102	238	44%
NATCHITOCHE	4	80	230	36%
ORLEANS	67	1,580	5,057	32%
OUACHITA	25	344	907	40%
PLAQUEMINES	2	42	129	34%
POINTE COUPEE	2	44	139	33%
RAPIDES	15	219	592	40%
RED RIVER	0	28	66	42%

RESIDENCE	AGE OF MOTHER		ALL AGES	% OF BIRTHS TO TEEN MOTHERS
	<15 YRS.	15-19 YRS.		
RICHLAND	3	47	176	28%
SABINE	3	39	95	44%
ST. BERNARD	2	69	160	44%
ST. CHARLES	4	63	186	36%
ST. HELENA	0	21	62	33%
ST. JAMES	2	46	149	32%
ST. JOHN	2	74	222	34%
ST. LANDRY	7	169	497	35%
ST. MARTIN	1	81	273	30%
ST. MARY	2	124	374	33%
ST. TAMMANY	3	127	369	35%
TANGIPAHOA	8	216	586	38%
TENSAS	0	19	60	31%
TERREBONNE	7	180	456	41%
UNION	2	45	86	54%
VERMILION	0	72	192	37%
VERNON	2	50	148	35%
WASHINGTON	6	88	222	42%
WEBSTER	4	72	190	40%
WEST BATON ROUGE	0	38	118	32%
WEST CARROLL	0	28	53	52%
WEST FELICIANA	0	18	50	36%
WINN	4	32	96	37%

Out of Wedlock Births				
TOTALS	383	8,176	23,543	35%

Live Births				
TOTALS	407	12,708	77,944	16%

* These figures are from the 1986 Out of Wedlock Births by parish of the Louisiana residents, provided by the Public Health Statistics, Department of Health and Human Resources Office of Preventive and Public Health Services. The % of Births of Teen Mothers was calculated by the Project TEEN staff at the Louisiana State Department of Education.²

EDUCATION

Education is an important piece of the teenage pregnancy puzzle. Each year nearly 500,000 teens 19 or younger give birth to children. Approximately 50% of the teens who give birth before the age of 18 never complete high school. Data from the National Center for Education Statistics shows that more than one-fourth of the teens who dropped out of school had a child between their sophomore and senior years of high school. There are over 45,000 children under the age of six in Louisiana whose mothers are of school age. 12

Teenage pregnancy has severe consequences for the economic future of the teenager and her family. Because teenage mothers frequently fail to complete their education, teens dependency on the welfare system is greater because teens have no marketable skills thus limiting their job opportunities.

A high percentage of students dropping out of high school are pregnant girls and young women. During the 1986 school year, 376 Louisiana girls gave pregnancy as the reason they quit school. 3

Louisiana ranks 51st in the nation in graduation rates according to the Secretary of Education's "Wall Chart." The dropout problem is of great concern in Louisiana because in 1985-86 the state had a 57% graduation rate. 12

Continuing a high school education is a severe problem for teen mothers. The challenges of parenthood make high school completion difficult. Nationally forty-three percent of the young women who quit school do so due to pregnancy or marriage. Teen mothers and parents need jobs, and they need to earn wages that can support a family. But in today's economic times, jobs for young mothers are scarce. The completion of an education is vital to the economic success of these teen parents.

Teen pregnancy has always been with us, but the devastating social and economic consequences associated with teenage parenthood are now. Only in recent years has the majority of teen mothers raised their children as single parents. The difficulties of coordinating schooling and parenthood definitely explain the difficulties for teen mothers in completing their education.

Data from the "Children In Need" Executive Summary from the Committee for Economic Development states; "Each year's class of dropouts costs the nation more than \$240 billion in lost earnings and forgone taxes over their lifetimes. Billions more will be spent on crime control and on welfare, health care, and other social services." 9

As stated in this report on Children in Need, "Children from poor and single-parent households are more likely than others to be children of teenage parents and to become teenage parents themselves. By age five, the children of teen parents already run a high risk of later employability. Not only do teen parents often lack employability skills, they also lack the necessary resources to begin developing their children's future parenting and employability skills." 9

The dropout problem in Louisiana is alarming as evidenced by 8,608 dropouts in registration of 22,796 in 1985-86. (Source: Bulletin 1472, 1317 Annual Financial and Statistical Report, Louisiana Department of Education, 1983-84 Session). Regarding females, pregnancy is the number one cause of dropout, as evidenced by the fact that eight out of ten females who first become mothers at the age of 19 or younger never complete high school. Compounding the problem in Louisiana, teen mothers face a greater risk of unemployment and welfare dependency due to the lack of education and employment.

Young women, who are highly motivated to continue their schooling and get jobs are likely to postpone sex and pregnancy. The teenage pregnancy rate is highest where the level of educational achievement is lowest, and the rate falls where educational achievement and employment rates rise. It is a fact that school actions that encourage low expectations among female students can, in fact, unintentionally encourage early pregnancy. 7

The Project TEEN Task Force recommends that schools can play an important role in preventing early pregnancy and parenting by ensuring that a wide range of educational opportunities are available to girls and young women. Moreover, schools can exert leadership in working with social service agencies and health care providers to ensure that the other needs of these students are met, so that they can continue to be students rather than become dropout statistics.

RETURN BY _____

LOUISIANA DEPARTMENT OF EDUCATION

P.L. 92-318

TITLE IX

WOMEN'S EDUCATIONAL EQUITY ASSISTANCE PROGRAM, PROJECT TEEN

PROJECT TEEN - MODEL SURVEY INSTRUMENT

Spring 1987

PROBLEM: Louisiana currently ranks third in the nation with respect to live births to teenagers. Sixty-one percent (61%) of all teens who gave birth did not complete high school

Title IX- is partially designed to assist teenagers who are pregnant by especially promoting sex equity in classes programs and extra-curricular activities. Title IX encourages equity among adolescent pregnant females whether they are married or unmarried. Institutions should promote equitable programs for teen mothers, and problems associated with pregnancy such as; false pregnancy, termination of pregnancy, childbirth problems or recovery time from these conditions. This would include admission policies and practices.

This survey form is due _____. Please return the completed survey to:

George-Ann St. Les, Project Manager
Project TEEN
Louisiana Department of Education
Post Office Box 94064 - Room 608
Rouge, Louisiana 70804-9064.

For assistance, please call at (504) 342-5823.

PARISH _____

PERSON COMPLETING THIS SURVEY _____

TITLE _____

DATE _____ TELEPHONE NO. _____

To the best of my knowledge, the data reported in this survey is true and correct.

Signature Date

Title

ADMISSION OF PREGNANT & PARENTING STUDENTS TO PROGRAMS AND ACTIVITIES:

1. Does your school district have any policies for attendance and absenteeism for pregnant teens? (Please attach the policy, if Yes).

____ Yes ____ No

If no, describe what happens when these students return to your school system.

In the categories below, please list the number of students in each appropriate category.

Total number of pregnant students remained in the regular classroom and/or school program.

Total number of students remained in the regular classroom and/or school program, but also enrolled in special courses/programs?

Total number of students enrolled in an alternative school, program, or class?

Total number of students that receive/received homebound instruction?

Total number of students that participate/participated in the home study program?

Total number of students that dropped out of your school district because of pregnancy?

Total number of students enrolled in other programs not listed below, please specify?

Students information not available.

TOTAL

3. According to the following categories, please indicate the number of adolescent females that became pregnant in your school during the 1985-86 and 1986-87 school year up until March of 1987.

AGE	RACE	1985-86	1986-87
11-12	Black		
	White		
	Hispanic		
	Asian		
13-14	Black		
	White		
	Hispanic		
	Asian		
15-16	Black		
	White		
	Hispanic		
	Asian		
17-18	Black		
	White		
	Hispanic		
	Asian		
19	Black		
	White		
	Hispanic		
	Asian		

4. After childbirth, how many parenting girls returned to or stayed in the regular classroom/program?

- a) Total number of students who stayed in a special class/program. _____
- b) Total number of students who did not return to school? _____
- c) Total number of students who are responsible fathers? _____
- e) Total number of students who remained on homebound? _____
- f) Total number of students where information is not available? _____

TOTAL _____

5. Does your school require pregnant students to have a doctor's certification before they can participate in any class or activity, and are those same requirements made of all other students with conditions requiring the attention of a physician?

- _____ Does not apply, since medical certification is not required for any condition.
- _____ Yes, medical certification requirements are the same for pregnant students as for other students.
- _____ No, medical certification requirements are different for pregnancy.
- _____ If no, describe the requirements for pregnant students and how they differ.

OVER

6. What resources do you feel should be made available to local school districts in order to address Teen Pregnancy? Rank 1 through 4.

	Are Services Available? (Check)	
Alternative School _____	_____ Yes	_____ No
Counseling Services _____	_____ Yes	_____ No
Employment Assistance _____	_____ Yes	_____ No
Health Care _____	_____ Yes	_____ No
Other _____	_____ Yes	_____ No

Please return this survey with your district/procedure regarding Teenage Pregnancy.

THANK YOU FOR GIVING PROMPT ATTENTION TO THIS SURVEY.

RETURN DATE

ESTIMATED NUMBER OF PREGNANT STUDENTS-1986-87 SCHOOL YEAR

RESIDENCE	REGULAR CLASS/ SCHOOL	ALTN/SPECIAL PROGRAMS	HOMEBOUND HOME STUDY	NUMBER OF DROPPED OUT PREGNANCY
ACADIA	27	0	2	5
ALLEN	8	0	0	2
ASCENSION*	N/A	N/A	N/A	N/A
ASSUMPTION	16	2	5	10
AVOYELLES	6	0	3	2
BEAUREGARD	17	1	9	5
BIENVILLE	8	1	7	2
BOSSIER	44	6	32	7
CADDO	83	97	22	18
CALCASIEU	N/A	N/A	75	N/A
CALDWELL	5	0	10	3
CAMERON	4	0	1	1
CATAHOULA	2	N/A	4	1
CLAIBORNE	31	2	4	3
CONCORDIA	22	0	28	25
DESOTO	14	0	2	5
EAST BATON ROUGE *	N/A	N/A ?	N/A	N/A
EAST CARROLL*	27	N/A	N/A	4
EAST FELICIANA	13	0	1	0
EVANGELINE	15	1	17	1
FRANKLIN	38	0	0	22
GRANT*	N/A	N/A	N/A	N/A
IBERIA	N/A	N/A	69	13
IBERVILLE	25	6	20	8
JACKSON	25	0	0	5
JEFFERSON	N/A	N/A	N/A	N/A
JEFFERSON DAVIS	21	2	3	5

RESIDENCE	REGULAR CLASS/ SCHOOL	ALTN/SPECIAL PROGRAMS	HOMEBOUND HOME STUDY	NUMBER OF DROPPED OUT PREGNANCY
LAFAYETTE	N/A	100	3	0
LAFOURCHE	15	0	0	0
LASALLE	9	0	8	5
LINCOLN	N/A	N/A	1	11
LIVINGSTON	13	0	5	5
MADISON	31	3	9	5
MOREHOUSE	12	17	0	0
NATCHITOCES	N/A	0	8	N/A
ORLEANS	N/A	N/A	N/A	N/A
OUACHITA	27	0	49	4
PLAQUEMINES	19	0	6	3
POINTE COUPEE	N/A	N/A	6	N/A
RAPIDES	38	18	0	16
RED RIVER	7	1	0	2
RICHLAND	6	N/A	9	5
SABINE	23	0	1	0
ST. BERNARD	33	15	5	3
ST. CHARLES	3	0	13	7
ST. HELENA	7	0	0	4
ST. JAMES	21	1	0	1
ST. JOHN	27	1	N/A	3
ST. LANDRY	70	7	40	17
ST. MARTIN	5	1	23	6
ST. MARY	25	11	24	6
ST. TAMMANY	36	0	0	34
TANGIPAHOA	45	0	2	27
TENSAS	N/A	N/A	3	N/A
TERREBONNE	37	4	1	13
UNION	24	1	7	2
VERMILLION	10	N/A	9	2
VERNON	40	2	34	4

RESIDENCE	REGULAR CLASS/ SCHOOL	ALTN/SPECIAL PROGRAMS	HOMEBOUND HOME STUDY	NUMBER OF DROPPED OUT PREGNANCY
WASHINGTON	67	0	4	17
WEBSTER	18	2	8	3
WEST BATON ROUGE	12	0	12	N/A
WEST CARROLL*	N/A	N/A	N/A	N/A
WEST FELICIANA	13	0	0	N/A
WINN	12	0	7	8
CITY OF BOGALUSA	18	1	15	3
MONROE CITY SCHOOLS	58	38	56	13
GRAND TOTAL	<u>1,232</u>	<u>341</u>	<u>682</u>	<u>376</u>
*DID NOT RESPOND TO PROJECT TEEN SURVEY				

**These figures are from the 1986-87 Project TEEN Surveys conducted in April 1987 and disseminated to the 67 Louisiana parish/city educational systems who voluntarily participated in this federal grant project.3

HEALTH

Young teenage mothers pay the price for early childbearing. The teenage mother has special problems both physically and emotionally. Data provided by the March of Dimes reports the death rate from pregnancy complications is much higher among girls who give birth under age 15 than among older mothers. The teenage mother is more likely to be undernourished and suffer premature or prolonged labor. During the first three months of pregnancy, seven out of ten pregnant teenagers do not see a doctor or go to a clinic. In addition to the lack of prenatal medical care, the teenage mother also has poor eating habits, smokes, and with the use of alcohol and drugs increases the risk of having a baby with health problems. 10

The baby growing inside the teen mother is in a most dependent and often risky place. The most immediate health problem is low birthweight. Babies born to teenagers are born too small and too soon. The health problems associated with low birthweight babies are immature organ systems such as the underdeveloped lungs, heart and brain, difficulty in controlling body temperatures and blood sugar levels, mental retardation and the risk of dying in early infancy that is much higher than among normal weight babies of 5 1/2 pounds or more. 10

A baby with underdeveloped lungs will not be able to breathe on its own. The most common problems associated with low birthweight are of a respiratory nature. About half the babies need ventilator equipment to help them breathe, anywhere from three days to 10 months. During the first two years of life, pneumonia is a danger. 10

As quoted by Dr. William Gill, a neonatologist at the Tulane Medical Center, "On the average, the smallest babies spend three months in intensive care after birth; heavier babies spend about a week. The cost is about \$1,000 a day."

In Louisiana the 1986 infant mortality rate was 11.9% which is higher than the 10.4% national infant mortality rate.

The importance of providing skilled instruction for pregnant teens about proper health care during pregnancy is vital for the growth and development of a healthy baby. Skilled adults who are capable of communicating with adolescents are needed in the school system and community agencies to encourage and stress the importance of responsible behavior. The need for child care services and parenting classes to be provided for teen parents has been one of the most common responses given by the Teen mothers and fathers surveyed. Many teen mothers do not know the proper nutritional care to take for themselves much less the importance of good prenatal care for their unborn child.

The responses were overwhelming to questions #19 and #20, which pertain to teen mothers following a prenatal diet, smoking, drinking, and continuing to use non prescription drugs during their pregnancy. Over 50% of the teen mothers questioned did not seek medical attention until the sixth month of their pregnancy. Many did not follow a prenatal diet during their pregnancy. Regarding the continuation of poor eating habits, smoking and drinking, many of the teen mothers continued these same habits during their pregnancy. However, concerning the use of non-prescription drugs, many of the teen mothers questioned did not continue with the use of drugs during their pregnancy.

TABLE XX-A
INFANT DEATHS (EXCLUSIVE OF STILLBIRTHS) BY PLACE OF OCCURRENCE
REALLOCATED TO MOTHER'S USUAL RESIDENCE AND SHOWN BY SEX, RACE, AND AGE
LOUISIANA, 1986

PARISH	TOTAL BY OCCURRENCE	TOTAL BY RESIDENCE	RATE/ 1000 LIVEBIRTHS	SEX- RACE	TOTAL BY SEX-RACE	AGE IN DAYS					
						UNDER 1	1-6	7-13	14-20	21-27	28-365
TOTAL	941	925	11.9	MW FW MNM FNM	216 177 311 221	346 84 65 118 79	167 46 33 53 35	41 6 8 15 12	29 10 7 5 7	21 6 6 7 2	321 64 58 113 86
ACADIA	2	10	9.3	MW FW MNM FNM	4 2 1 3	1 - - -	2 1 - 1	- - - -	- - - -	- - - -	7 3 2 2
CROWLEY*	1	4	13.7	MW FW MNM FNM	1 2 - 1	- - - -	1 - - 1	- - - -	- - - -	- - - -	3 1 2 -
ALLEN	1	5	15.3	MW FW MNM FNM	1 - 3 1	1 - 1 -	1 - - 1	- - - -	- - - -	- - - -	3 1 2 -
ASCENSION	1	12	10.5	MW FW MNM FNM	5 4 - 3	9 4 3 2	- - - -	1 - 1 -	- - - -	- - - -	2 1 - 1
ASSUMPTION	1	4	9.3	MW FW MNM FNM	- - 3 1	3 - 2 1	- - - -	- - - -	- - - -	- - - -	1 - 1 -
AVOUELLES	3	6	8.7	MW FW MNM FNM	3 1 1 1	2 1 - -	1 1 - -	- - - -	- - - -	- - - -	3 1 1 1
BEAUREGARD	3	12	22.1	MW FW MNM FNM	5 2 2 3	7 3 - 3	2 1 1 -	2 1 - -	- - - -	- - - -	1 - 1 -
DE RIDDER*	3	8	34.8	MW FW MNM FNM	5 1 - 2	5 3 - 2	1 1 - -	1 1 - -	- - - -	- - - -	1 - 1 -
BIENVILLE	1	4	16.2	MW FW MNM FNM	- - 3 1	1 - 1 -	- - - -	- - - -	- - - -	- - - -	3 - 2 1
BOSSIER	5	11	6.5	MW FW MNM FNM	5 2 4 -	3 1 1 -	4 3 1 -	1 - 1 -	- - - -	- - - -	3 1 1 -
BOSSIER CITY*	5	5	4.6	MW FW MNM FNM	3 1 1 -	1 1 - -	1 1 - -	1 - 1 -	- - - -	- - - -	2 1 - -

(CONTINUED)

TABLE XX-A
INFANT DEATHS (EXCLUSIVE OF STILLBIRTHS) BY PLACE OF OCCURRENCE
REALLOCATED TO MOTHER'S USUAL RESIDENCE AND SHOWN BY SEX, RACE, AND AGE
LOUISIANA, 1986

PARISH	TOTAL BY OCCURRENCE	TOTAL BY RESIDENCE	RATE/ 1000 LIVEBIRTHS	SEX- RACE	TOTAL BY SEX-RACE	AGE IN DAYS					
						UNDER 1	1-6	7-13	14-20	21-27	28-365
CADD0	121	70	14.6	MW	15	28	13	2	3	1	23
				FW	9	5	4	-	1	-	5
				MNW	23	3	1	-	-	-	5
				FNW	23	9	6	-	-	-	7
SHREVEPORT*	113	58	14.5	MW	11	25	12	2	1	1	17
				FW	7	5	3	-	1	-	2
				MNW	21	1	1	-	-	-	5
				FNW	19	9	6	1	-	-	5
CALCASIEU	39	41	14.2	MW	16	10	8	-	2	2	19
				FW	11	4	6	-	1	-	5
				MNW	9	4	2	-	-	-	5
				FNW	5	2	-	-	-	2	4
LAKE CHARLES*	35	21	16.4	MW	4	2	3	-	1	1	14
				FW	5	1	2	-	-	-	1
				MNW	7	-	1	-	-	-	4
				FNW	5	1	-	-	1	-	5
SULPHUR*	3	6	17.7	MW	2	1	2	-	-	1	2
				FW	3	-	1	-	-	-	1
				MNW	1	1	1	-	-	-	1
				FNW	-	-	-	-	-	1	-
CALDWELL	1	1	5.7	MW	-	-	-	-	-	-	1
				FW	-	-	-	-	-	-	-
				MNW	1	-	-	-	-	-	1
				FNW	-	-	-	-	-	-	-
CANERON	-	1	5.9	MW	1	-	-	-	-	-	1
				FW	-	-	-	-	-	-	1
				MNW	-	-	-	-	-	-	-
				FNW	-	-	-	-	-	-	-
CATAHOULA	-	-	-	MW	-	-	-	-	-	-	-
				FW	-	-	-	-	-	-	-
				MNW	-	-	-	-	-	-	-
				FNW	-	-	-	-	-	-	-
CLAIBORNE	-	1	4.3	MW	-	1	-	-	-	-	-
				FW	-	-	-	-	-	-	-
				MNW	1	1	-	-	-	-	-
				FNW	-	-	-	-	-	-	-
CONCORDIA	1	2	5.4	MW	-	-	1	-	-	-	1
				FW	1	-	-	-	-	-	-
				MNW	-	-	1	-	-	-	-
				FNW	1	-	-	-	-	-	1
DESOTO	1	5	10.2	MW	-	2	-	-	2	-	1
				FW	1	-	-	-	-	-	-
				MNW	2	1	-	-	1	-	1
				FNW	2	1	-	-	1	-	-
E BATON ROUGE	123	89	13.0	MW	13	44	14	5	-	2	24
				FW	13	8	1	-	-	1	3
				MNW	37	6	1	1	-	-	5
				FNW	26	17	6	2	-	1	11
(CONTINUED)						13	6	2	-	-	5

**TABLE XX-A
 INFANT DEATHS (EXCLUSIVE OF STILLBIRTHS) BY PLACE OF OCCURRENCE
 REALLOCATED TO MOTHER'S USUAL RESIDENCE AND SHOWN BY SEX, RACE, AND AGE
 LOUISIANA, 1986**

PARISH	TOTAL BY OCCURRENCE	TOTAL BY RESIDENCE	RATE/ 1000 LIVEBIRTHS	SEX- RACE	TOTAL BY SEX-RACE	AGE IN DAYS					
						UNDER 1	1-6	7-13	14-20	21-27	28-365
BATON ROUGE*	122	74	14.1	MW	7	36	12	4	-	1	21
				FW	7	4	1	-	-	-	2
				MNW	36	4	-	-	-	-	3
				FNW	24	16	6	2	-	1	11
BAKER*	-	4	16.1	MW	2	2	-	-	-	-	2
				FW	2	1	-	-	-	-	1
				MNW	-	-	-	-	-	-	-
				FNW	-	-	-	-	-	-	-
EAST CARROLL	1	5	20.6	MW	-	3	-	1	-	-	1
				FW	-	-	-	-	-	-	-
				MNW	2	-	-	-	-	-	-
				FNW	3	3	-	1	-	-	1
E FELICIANA	1	2	5.9	MW	1	-	1	-	-	-	1
				FW	-	-	-	-	-	-	-
				MNW	1	-	-	-	-	-	1
				FNW	-	-	-	-	-	-	-
EVANGELINE	-	4	5.7	MW	1	-	-	1	-	-	3
				FW	2	-	-	-	-	-	1
				MNW	-	-	-	1	-	-	-
				FNW	1	-	-	-	-	-	1
FRANKLIN	2	10	25.4	MW	4	3	4	1	-	-	2
				FW	2	1	3	-	-	-	-
				MNW	2	1	-	1	-	-	-
				FNW	2	1	1	-	-	-	2
GRANT	-	2	7.3	MW	-	1	1	-	-	-	-
				FW	-	-	-	-	-	-	-
				MNW	1	1	-	-	-	-	-
				FNW	1	-	1	-	-	-	-
IBERIA	4	10	7.1	MW	4	2	1	1	-	1	5
				FW	1	2	1	-	-	-	1
				MNW	3	-	-	-	-	-	1
				FNW	2	-	-	1	-	1	2
NEW IBERIA*	4	5	7.2	MW	1	1	-	1	-	1	2
				FW	-	1	-	-	-	-	-
				MNW	3	-	-	1	-	1	1
				FNW	1	-	-	-	-	-	1
IBERVILLE	3	3	4.6	MW	-	-	1	-	-	-	2
				FW	1	-	-	-	-	-	1
				MNW	1	-	1	-	-	-	-
				FNW	1	-	-	-	-	-	1
JACKSON	3	1	3.7	MW	-	1	-	-	-	-	-
				FW	-	-	-	-	-	-	-
				MNW	-	-	-	-	-	-	-
				FNW	1	1	-	-	-	-	-
JEFFERSON	141	74	9.9	MW	30	25	18	2	3	1	25
				FW	14	9	7	1	-	-	10
				MNW	20	6	5	-	-	-	3
				FNW	10	9	4	-	-	1	6

(CONTINUED)

TABLE IX-A
 INFANT DEATHS (EXCLUSIVE OF STILLBIRTHS) BY PLACE OF OCCURRENCE
 REALLOCATED TO MOTHER'S USUAL RESIDENCE AND SHOWN BY SEX, RACE, AND AGE
 LOUISIANA, 1986

PARISH	TOTAL BY OCCURRENCE	TOTAL BY RESIDENCE	RATE/ 1000 LIVEBIRTHS	SEX- RACE	TOTAL BY SEX-RACE	AGE IN DAYS					
						UNDER 1	1-6	7-13	14-20	21-27	28-365
KENNER*	4	15	12.3	MW	7	6	4	-	-	-	5
				FW	4	3	1	-	-	-	3
				MNW	3	1	1	-	-	-	1
				FNW	1	-	1	-	-	-	-
GREYNA*	17	11	17.1	MW	3	2	3	-	-	-	6
				FW	2	-	1	-	-	-	2
				MNW	6	2	2	-	-	-	4
				FNW	-	-	-	-	-	-	-
HARRAHAN*	-	-	-	MW	-	-	-	-	-	-	-
				FW	-	-	-	-	-	-	-
				MNW	-	-	-	-	-	-	-
				FNW	-	-	-	-	-	-	-
WESTWEG*	-	3	11.0	MW	1	-	1	-	-	1	1
				FW	-	-	1	-	-	-	-
				MNW	1	-	-	-	-	1	-
				FNW	1	-	-	-	-	-	1
JEFF DAVIS	-	2	3.6	MW	-	1	-	-	-	-	1
				FW	-	-	-	-	-	-	-
				MNW	2	1	-	-	-	-	1
				FNW	-	-	-	-	-	-	-
JENNINGS*	-	1	4.3	MW	-	1	-	-	-	-	-
				FW	-	-	-	-	-	-	-
				MNW	1	1	-	-	-	-	-
				FNW	-	-	-	-	-	-	-
LAFAYETTE	68	45	13.7	MW	9	19	8	3	3	3	9
				FW	14	4	1	1	1	1	1
				MNW	17	6	2	1	1	2	2
				FNW	5	2	3	-	1	-	6
LAFAYETTE*	68	31	17.0	MW	7	14	5	2	2	2	6
				FW	7	3	-	1	1	1	1
				MNW	12	4	1	-	-	1	1
				FNW	5	5	2	1	-	-	4
LAFOURCHE	7	22	14.1	MW	4	8	5	2	1	-	6
				FW	10	2	-	-	1	-	2
				MNW	4	5	2	-	-	-	2
				FNW	4	1	2	2	-	-	1
THIBODAUX*	4	2	6.4	MW	-	-	2	-	-	-	-
				FW	-	-	-	-	-	-	-
				MNW	2	-	-	-	-	-	-
				FNW	-	-	-	-	-	-	-
LASALLE	-	2	8.8	MW	-	-	1	-	-	-	1
				FW	1	-	1	-	-	-	-
				MNW	1	-	-	-	-	-	1
				FNW	-	-	-	-	-	-	-
LINCOLN	2	10	16.8	MW	3	3	4	-	-	-	3
				FW	1	1	1	-	-	-	1
				MNW	2	1	-	-	-	-	1
				FNW	4	-	3	-	-	-	1

(CONTINUED)

TABLE XI-A
INFANT DEATHS (EXCLUSIVE OF STILLBIRTHS) BY PLACE OF OCCURRENCE
REALLOCATED TO MOTHER'S USUAL RESIDENCE AND SHOWN BY SEX, RACE, AND AGE
LOUISIANA, 1986

PARISH	TOTAL BY OCCURRENCE	TOTAL BY RESIDENCE	RATE/ 1000 LIVE BIRTHS	SEX- RACE	TOTAL BY SEX-RACE	AGE IN DAYS					
						UNDER 1	1-6	7-13	14-20	21-27	28-365
RUSTON*	1	4	14.0	M F NM FM	1 1 1 1	2 1 1 -	1 - - 1	- - - -	- - - -	- - - -	1 - 1 -
LIVINGSTON	1	12	9.8	M F NM FM	9 3 - -	7 7 - -	2 1 1 -	2 2 - -	- - - -	- - - -	1 1 - -
MADISON	1	4	14.2	M F NM FM	- - 2 2	3 - 1 2	- - - -	- - - -	- - - -	- - - -	1 - 1 -
TALLULAH*	1	4	17.2	M F NM FM	- - 2 2	3 - 1 2	- - - -	- - - -	- - - -	- - - -	1 - 1 -
MOREHOUSE	-	2	4.0	M F NM FM	- 1 - 1	- - - -	2 1 1 -	- - - -	- - - -	- - - -	- - - -
MASTROP*	-	1	4.0	M F NM FM	- - - 1	- - - -	1 - - 1	- - - -	- - - -	- - - -	- - - -
NATCHITOCHES	1	2	3.3	M F NM FM	- 1 1 -	- - - -	- - - -	- - - -	- - - -	- - - -	2 1 1 -
NATCHITOCHES*	-	-	-	M F NM FM	- - - -	- - - -	- - - -	- - - -	- - - -	- - - -	- - - -
ORLEANS	220	156	15.5	M F NM FM	20 8 74 54	56 10 2 28 16	27 3 3 12 9	6 1 - 4 1	8 3 1 3 1	3 1 1 1 -	56 2 1 26 27
OUACHITA	51	39	15.5	M F NM FM	5 8 19 7	16 1 3 7 5	6 - 1 3 2	2 - 2 2 -	1 1 - - -	1 - 1 - -	13 3 3 7 -
MONROE*	50	27	22.0	M F NM FM	1 4 17 5	10 - 2 3 3	5 - 3 2 -	2 - 2 - -	- - - - -	1 - 1 - -	9 1 1 7 -
WEST MONROE*	-	-	-	M F NM FM	- - - -	- - - -	- - - -	- - - -	- - - -	- - - -	- - - -

(CONTINUED)

TABLE IX-A
INFANT DEATHS (EXCLUSIVE OF STILLBIRTHS) BY PLACE OF OCCURRENCE
REALLOCATED TO MOTHER'S USUAL RESIDENCE AND SHOWN BY SEX, RACE, AND AGE
LOUISIANA, 1986

PARISH	TOTAL BY OCCURRENCE	TOTAL BY RESIDENCE	RATE/ 1000 LIVE BIRTHS	SEX- RACE	TOTAL BY SEX-RACE	AGE IN DAYS					
						UNDER 1	1-6	7-13	14-20	21-27	28-365
PLAQUEMINES	-	9	15.9	M F NW FW	1 3 3 2	3 - 2 -	2 1 - -	- - - -	- - - -	- - - -	4 1 1 2
POINTE COUPEE	1	8	19.3	M F NW FW	- 1 4 3	2 - - 1	3 - 3 -	1 - - 1	- - - -	- - - -	2 - 1 1
RAPIDES	34	32	14.0	M F NW FW	6 9 9 8	6 1 3 1	3 - 2 1	2 - - 1	- - - -	1 - - 1	20 5 4 5
ALEXANDRIA*	21	20	19.3	M F NW FW	4 3 7 6	3 1 - 1	2 - 1 -	2 - - 1	- - - -	1 - - 1	12 2 4 3
PINEVILLE*	9	1	3.7	M F NW FW	- - 1 -	- - - -	- - - -	- - - -	- - - -	- - - -	1 - 1 -
RED RIVER	-	1	5.7	M F NW FW	- - - 1	1 - - 1	- - - -	- - - -	- - - -	- - - -	- - - -
RICHLAND	1	3	7.3	M F NW FW	- 1 - 2	2 - 1 1	- - - -	- - - -	- - - -	1 - - 1	- - - -
SABINE	1	4	10.7	M F NW FW	2 2 - -	1 - 1 -	- - 1 -	1 - 1 -	- - - -	- - - -	1 1 - -
ST BERNARD	4	9	8.4	M F NW FW	2 6 1 -	3 - 3 -	2 - 2 -	- - - -	- - - -	- - - -	4 2 1 -
ST CHARLES	2	5	5.7	M F NW FW	2 1 1 1	2 - 1 1	- - - 1	1 - 1 -	- - - -	- - - -	2 2 - -
ST HELENA	1	2	11.6	M F NW FW	- - 1 1	- - - -	1 - 1 -	- - - -	- - - -	- - - -	1 - 1 -
ST JAMES	-	8	19.8	M F NW FW	1 - 3 4	5 - 2 3	1 - - -	- - - 1	1 - - -	- - - -	1 - 1 -

(CONTINUED)

TABLE IX-A
 INFANT DEATHS (EXCLUSIVE OF STILLBIRTHS) BY PLACE OF OCCURRENCE
 REALLOCATED TO MOTHER'S USUAL RESIDENCE AND SHOWN BY SEX, RACE, AND AGE
 LOUISIANA, 1986

PARISH	TOTAL BY OCCURRENCE	TOTAL BY RESIDENCE	RATE/ 1000 LIVEBIRTHS	SEX- RACE	TOTAL BY SEX-RACE	AGE IN DAYS					
						UNDER 1	1-6	7-13	14-20	21-27	28-365
ST JOHN	-	11	12.5	MW	7	5	2	1	-	-	3
				FW	1	4	2	-	-	-	1
				MNW	-	-	-	-	-	-	1
				FNW	3	1	-	1	-	-	1
ST LANDRY	9	17	10.5	MW	3	9	2	1	-	-	5
				FW	3	3	1	-	-	-	-
				MNW	3	2	-	-	-	-	1
				FNW	8	2	1	1	-	-	4
OPELOUSAS*	4	6	12.7	MW	-	2	1	1	-	-	2
				FW	1	-	1	-	-	-	-
				MNW	1	1	-	-	-	-	-
				FNW	4	1	-	1	-	-	2
EUNICE*	3	2	7.6	MW	-	2	-	-	-	-	-
				FW	-	-	-	-	-	-	-
				MNW	1	1	-	-	-	-	-
				FNW	1	1	-	-	-	-	-
ST MARTIN	4	12	13.5	MW	1	5	3	-	1	-	3
				FW	2	1	1	-	-	-	-
				MNW	7	4	1	-	1	-	1
				FNW	2	-	-	-	-	-	2
ST MARY	9	14	11.5	MW	2	7	1	-	-	-	6
				FW	4	3	-	-	-	-	1
				MNW	8	3	1	-	-	-	4
				FNW	-	-	-	-	-	-	-
MORGAN CITY*	6	3	9.7	MW	-	2	-	-	-	-	1
				FW	-	1	-	-	-	-	1
				MNW	2	1	-	-	-	-	-
				FNW	-	-	-	-	-	-	-
ST TAMMANY	12	24	10.0	MW	13	6	4	1	-	1	12
				FW	6	1	2	-	-	-	3
				MNW	2	-	-	-	-	-	2
				FNW	3	1	-	-	-	-	2
SLIDELL*	6	6	12.6	MW	4	1	1	1	-	1	2
				FW	2	1	-	1	-	1	1
				MNW	-	-	1	-	-	-	-
				FNW	-	-	-	-	-	-	-
TANGIPAHOA	15	25	14.8	MW	5	7	5	-	-	1	12
				FW	7	2	1	-	-	1	2
				MNW	7	1	4	-	-	-	3
				FNW	6	1	-	-	-	-	5
HAMMOND*	3	8	26.1	MW	1	1	2	-	-	-	4
				FW	1	1	-	-	-	-	1
				MNW	3	-	2	-	-	-	1
				FNW	3	1	-	-	-	-	2
TENSAS	-	1	7.3	MW	-	1	-	-	-	-	-
				FW	-	-	-	-	-	-	-
				MNW	1	1	-	-	-	-	-
				FNW	-	-	-	-	-	-	-

(CONTINUED)

TABLE XX-A
 INFANT DEATHS (EXCLUSIVE OF STILLBIRTHS) BY PLACE OF OCCURRENCE
 REALLOCATED TO MOTHER'S USUAL RESIDENCE AND SHOWN BY SEX, RACE, AND AGE
 LOUISIANA, 1986

PARISH	TOTAL BY OCCURRENCE	TOTAL BY RESIDENCE	RATE/ 1000 LIVEBIRTHS	SEX- RACE	TOTAL BY SEX-RACE	AGE IN DAYS					
						UNDER 1	1-6	7-13	14-20	21-27	28-365
TERREBONNE	25	18	9.1	MW FW MHW FNW	6 6 3 3	7 3 1 2 1	4 2 - - 2	- - - - -	1 - 1 - -	1 - 1 - -	5 1 3 1 -
HOUMA*	1	6	7.2	MW FW MHW FNW	2 2 2 -	3 1 1 1 -	1 1 - - -	- - - - -	1 - 1 - -	- - - - -	1 - 1 - -
UNION	2	4	12.5	MW FW MHW FNW	1 - 2 1	1 - - 1	- - - -	- - - -	- - - -	1 1 - -	2 - - 2 -
VERMILION	2	8	8.7	MW FW MHW FNW	3 2 2 1	2 1 - 1 -	4 1 2 1 -	1 - - 1 -	- - - - -	- - - - -	1 1 - - -
ABBEVILLE*	2	4	14.7	MW FW MHW FNW	1 1 1 1	2 1 - 1 -	1 1 1 - 1	1 - - - -	- - - - -	- - - - -	- - - - -
VERNON	3	4	2.8	MW FW MHW FNW	1 2 1 -	1 1 - -	- - - -	- - - -	- - - -	- - - -	3 2 1 -
WASHINGTON	4	5	7.1	MW FW MHW FNW	- 2 2 1	3 - 1 1 1	- - - - -	- - - - -	1 1 - - -	- - - - -	1 - 1 - -
BOGALUSA*	3	3	13.6	MW FW MHW FNW	- 2 1 -	2 - 1 1 -	- - - - -	- - - - -	1 - 1 - -	- - - - -	- - - - -
WEBSTER	2	8	12.7	MW FW MHW FNW	1 2 4 1	1 - - 1 -	2 1 - 1 -	- - - - -	- - - - -	- - - - -	5 2 2 1 -
MINDEN*	1	2	8.0	MW FW MHW FNW	1 - 1 -	- - - -	2 1 - 1 -	- - - - -	- - - - -	- - - - -	- - - - -
W BATON ROUGE	-	6	15.0	MW FW MHW FNW	1 - 4 1	4 - 3 1	- - - -	- - - -	1 - 1 -	1 - - -	- - - -
WEST CARROLL	1	2	10.1	MW FW MHW FNW	- 1 1 -	- - - -	1 1 - -	- - - -	- - - -	- - - -	1 - 1 -

(CONTINUED)

TABLE XX-A
 INFANT DEATHS (EXCLUSIVE OF STILLBIRTHS) BY PLACE OF OCCURRENCE
 REALLOCATED TO MOTHER'S USUAL RESIDENCE AND SHOWN BY SEX, RACE, AND AGE
 LOUISIANA, 1986

PARISH	TOTAL BY OCCURRENCE	TOTAL BY RESIDENCE	RATE/ 1000 LIVEBIRTHS	SEX- RACE	TOTAL BY SEX-RACE	AGE IN DAYS					
						UNDER 1	1-6	7-13	14-20	21-27	28-365
W FELICIANA	-	3	20.0	MW	-	1	-	-	-	-	2
				FW	1	-	-	-	-	-	1
				MNW	1	-	-	-	-	-	1
				FNW	1	1	-	-	-	-	-
WINN	-	1	3.9	MW	-	1	-	-	-	-	-
				FW	-	-	-	-	-	-	-
				MNW	1	1	-	-	-	-	-
				FNW	-	-	-	-	-	-	-
OUT OF STATE**	12	28		MW	10	6	10	3	1	1	7
				FW	8	-	5	2	-	-	2
				MNW	5	3	3	-	-	-	2
				FNW	5	2	2	1	-	-	1

*CITIES INCLUDED IN PARISH TOTALS

**NOT INCLUDED IN STATE TOTALS

SUPPORT SERVICES

"Counseling services, parenting, child care and sex education, birth control information, teen peer counselors," were all responses actually given by the 600 teen mothers who voluntarily completed the Project TEEN questionnaires. 3

In the 1986-87 Project TEEN questionnaires disseminated to teen mothers/fathers, these data findings demonstrated a serious need for services and programs in Louisiana that address pregnant and parenting teens. The data revealed the lack of coordinated and collaborative services in this state. Further data showed inadequate and unevenly distributed services for adolescent and teen parents throughout the state. The existing programs have no network through which to disseminate information. There is little or no coordination through support services to even identify a high risk teen. While there are numerous programs for the general teen population, there are no coordinated or united systems or state agencies currently addressing the needs of this growing population of children having children.

The teen mothers and fathers who voluntarily participated in this project requested the above services and programs be implemented in the school systems in order for teen parents to continue with their education while rearing their child. Many of the teen fathers and mothers expressed the need for child care and sex education to be provided at the school level in order to assist them with this new parenting responsibility. If these services were offered many of the teen parents would not disrupt their education.

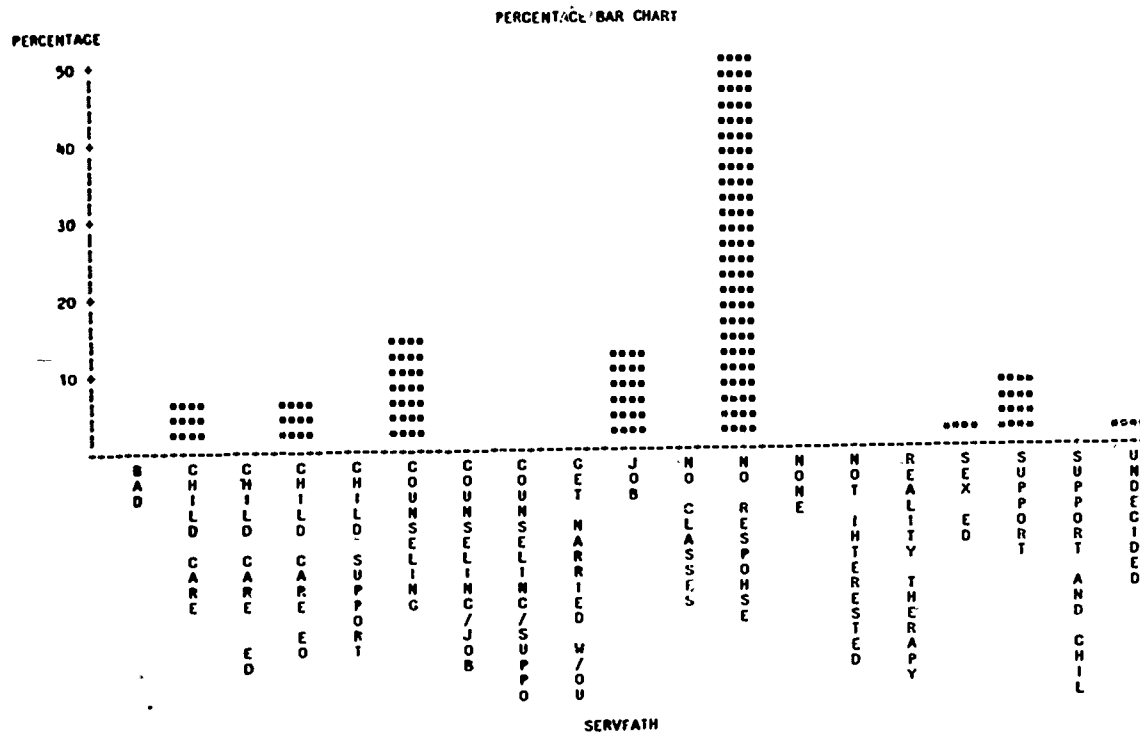
In the responses given by the fathers the main response was for employment assistance and parenting classes necessary for the teen father to meet his new responsibility for the education and financial support of his child. The most widely expressed need was the need for "counseling" or someone to talk to about their situation at the school level, so as to encourage them to continue with their education and not to become a dropout statistic.

In the 1986-87 school year over 2,000 girls were counseled by Louisiana school nurses; however, no individual child care education classes or parenting classes were conducted.

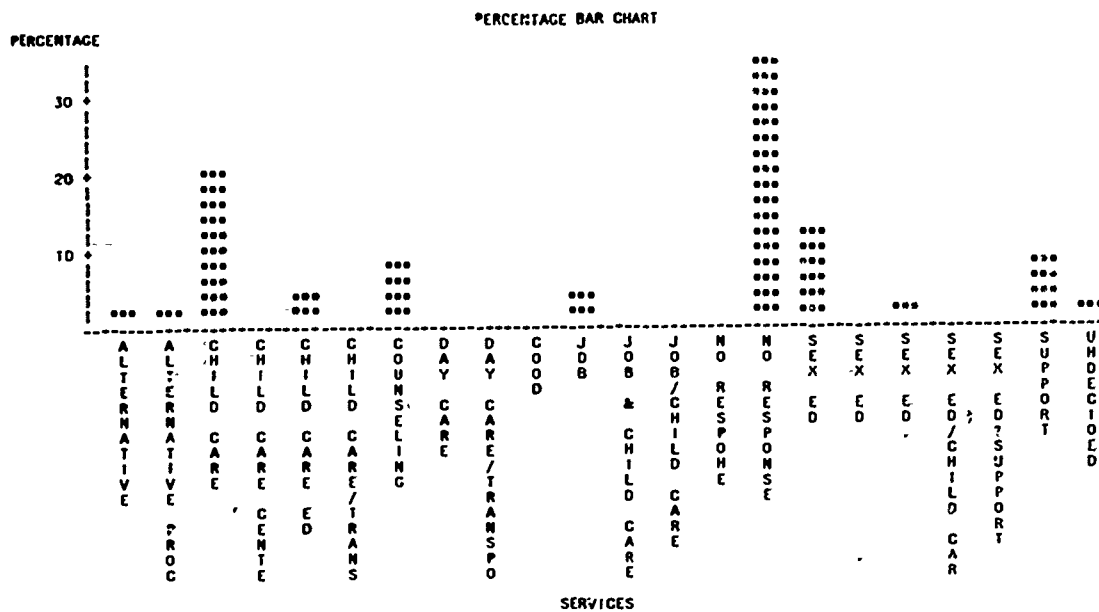
The needs for jobs, child care, transportation, counseling and sex education are high among the adolescents interviewed in this project. These needed services could decrease the ever increasing dropout statistics in Louisiana if schools would address the special needs of teen parents.

The most frequently requested need was for counseling services with flexible scheduling within the school in order to continue with their education after the pregnancy.

WHAT SERVICES WOULD LIKE SEE OFFERED?
What services would you like to see offered for father and child?



WHAT SERVICES WOULD LIKE SEE OFFERED?



PROJECT TEEN TASK FORCE RECOMMENDATIONS:

The Project TEEN Task Force recommends that guidance and emotional support needs to be given in the home. Parents need to improve their communication with their child about a positive self-esteem, decision-making skills and self responsibility and accountability for their behavior.

The Task Force recommends that schools can play an important role in preventing early pregnancy and parenting by ensuring that a wide range of educational opportunities are available to girls and young women. Moreover, schools can exert leadership in working with social service agencies and health care providers to ensure that the other needs of these students are met, so that they can continue to be students rather than become dropout statistics.

The Task Force recommends that collaborative and comprehensive planning among private and public agencies and professional health organizations be coordinated and developed to meet the needs of the adolescent.

The need for dropout prevention programs and pregnancy prevention programs such as refusal skills be developed to meet the needs of the preadolescent and teenager. These refusal skills are vital life skills necessary for becoming a productive citizen.

Furthermore, the Task Force recommends that a more accurate and updated accounting system needs to be implemented on the adolescent and teen parents between the ages of 12 to 20 in Louisiana. Currently in Louisiana this age group that receives AFDC, Medicaid, and Food Stamps and other state and federal assistance is not accounted for in the accounting system of the Office of Family Security. Additionally, counseling and job skills training workshops need to be implemented and conducted in this office in order to encourage independence from the welfare system.

The data findings have demonstrated the need for community and school services to meet the needs of the teen parent.

The Task Force recommends that a successful collaboration and coordination of services to the pregnant and parenting adolescents needs to be developed in this state. Support of teen parents efforts to continue their education needs to be implemented into the Louisiana school systems and community agencies.

Regarding the necessary health services for teenagers, Project TEEN Task Force recommends regular and early prenatal care for pregnant teens to insure a healthy weight gain for the infant and to decrease the infant mortality rate.

Overall the need for support services for the adolescent and teen parent and their family is an important ingredient for the teenager. Both physically and emotionally the support needs to be in the school as well as in the home and if not, the dependency upon the welfare system grows greater and therefore limits the future employment opportunities for the teen parent.

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A P P E N D I X

PROJECT TEEN QUESTIONNAIRE

INTERVIEW QUESTIONS: TEEN MOTHERS

AGE: _____

PARISH NAME & CODE NUMBER: _____

SCHOOL NAME: _____

PLEASE CIRCLE OR CHECK YOUR ANSWER:

1. What was your major source of sex education?
 - a. friends
 - b. parents
 - c. school
 - d. books
 - e. other
2. Do you live with your:
 - a. mother
 - b. father
 - c. both
 - d. grandparents
 - e. foster parents
 - f. other
3. Do you live in a:
 - a. combined family
 - b. step-family
 - c. original family
 - d. other
4. At what age did your mother have her first child?
 - a. Age _____
 - b. Unknown
5. Did your mother/father have any children when they were teenagers?
 - a. Yes
 - b. NO
6. Do you have any brothers or sisters who had children when they were teenagers?
 - a. Yes
 - b. No
7. Whom do you feel is responsible for birth control?
 - a. Male
 - b. Female
 - c. Both
8. Where did you get your information about birth control?
 - a. Parents
 - b. Friends
 - c. Doctor
 - d. Health Nurse
 - e. Books
 - f. Other
9. How do you feel about using birth control?

10. When did you first visit a doctor for your pregnancy?
 - a. Month _____
 - b. Year _____
11. Are you still seeing the father of your child?
 - a. Yes
 - b. No

12. Who gave you the most support:
- 12-1 emotionally - a. mother
b. father
c. boyfriend/husband
d. friends
e. other
- 12-2 financially - a. mother
b. father
c. boyfriend/husband
d. friends
e. other
13. Have you received any counseling during the pregnancy or after the birth of your baby?
a. yes
b. no
14. Have you received any support from your school in the areas of:
- | | | |
|-----------------------|-------------|-------|
| Attendance | 14-1 a. yes | b. no |
| Health care | 14-2 a. yes | b. no |
| Educational programs | 14-3 a. yes | b. no |
| Counseling services | 14-4 a. yes | b. no |
| Employment assistance | 14-5 a. yes | b. no |
15. Are you still attending regular school? If not, are you in a special school?
a. yes
b. no
16. What do you plan to obtain?
- | | | |
|---------------------|-------------|-------|
| GED | 16-1 a. yes | b. no |
| High School Diploma | 16-2 a. yes | b. no |
| Other | 16-3 a. yes | b. no |
17. Are you able to talk to your parents about your pregnancy?
- | | | |
|------------|--------|-------|
| 17-1 - mom | a. yes | b. no |
| 17-2 - dad | a. yes | b. no |
18. Is this your first child?
a. yes
b. no
19. Do you...
- | | | |
|---------------------------------|--------|-------|
| 19-1 smoke | a. yes | b. no |
| 19-2 drink | a. yes | b. no |
| 19-3 use non prescription drugs | a. yes | b. no |
20. Are you following a prenatal diet?
a. yes
b. no
21. Are you going to keep your baby?
a. yes
b. no
22. Are you going to place your child up for adoption?
a. yes
b. no
23. What services would you like to see offered, or would you use as a teen parent at your school or in your community?
-
-
-

RETURN QUESTIONNAIRES BY: MAY 26, 1987

24. Are you employed?

- a. yes
- b. no

25. What services would you like to see offered for the father of your child?(ie. counseling services).

PLEASE RETURN QUESTIONNAIRE BY MAY 26, 1987

PROJECT TEEN QUESTIONNAIRE

INTERVIEW QUESTIONS: **TEEN FATHERS**

AGE:

PARISH NAME & CODE NUMBER:

SCHOOL NAME:

1. What was your major source of sex education?
 - a. friends
 - b. parents
 - c. school
 - d. books
 - e. other
 2. Do you live with your:
 - a. mother
 - b. father
 - c. both
 - d. grandparents
 - e. foster parents
 - f. other
 3. Do you live in a:
 - a. combined family
 - b. step-family
 - c. original family
 - d. other
 4. Can you talk to your parents?
 - a. yes
 - b. no
 5. Did your mother/father have any children when they were teenagers?
 - a. yes
 - b. no
 6. Do you have any brothers or sisters who had children when they were teenagers?
 - a. yes
 - b. no
 7. Whom do you feel is responsible for birth control?
 - a. male
 - b. female
 - c. both
 8. Where did you get your information about birth control?
 - a. parents
 - b. friends
 - c. doctor
 - d. health nurse
 - e. books
 - f. other
 9. How do you feel about using birth control?
-
-
-

10. Are you still seeing the mother of your child?
 - a. yes
 - b. no

11. Who gave you the most support:

- 11-1 emotionally - a. mother
b. father
c. girlfriend/wife
d. friends
e. other

- 11-2 financially - a. mother
b. father
c. girlfriend / wife
d. friends
e. other

12. Have you received any counseling during the pregnancy or after the birth of your baby?

- a. yes
b. no

13. Have you received any support from your school in the areas of:

- | | | |
|-----------------------|-------------|-------|
| Attendance | 14-1 a. yes | b. no |
| Health care | 14-2 a. yes | b. no |
| Educational programs | 14-3 a. yes | b. no |
| Counseling services | 14-4 a. yes | b. no |
| Employment assistance | 14-5 a. yes | b. no |

14. Are you still attending regular school?

- a. yes
b. no

15. What do you plan to obtain?

- | | | |
|---------------------|-------------|-------|
| GED | 16-1 a. yes | b. no |
| High School Diploma | 16-2 a. yes | b. no |
| Other | 16-3 a. yes | b. no |

16. What do you feel are your responsibilities to the mother of your child and the child?

17. What are the expectations of your child?

18. Are you employed?

- a. yes
b. no

19. Did you want the mother of your child to have...

- a. the baby
b. an abortion
c. the baby placed with adoptive parents

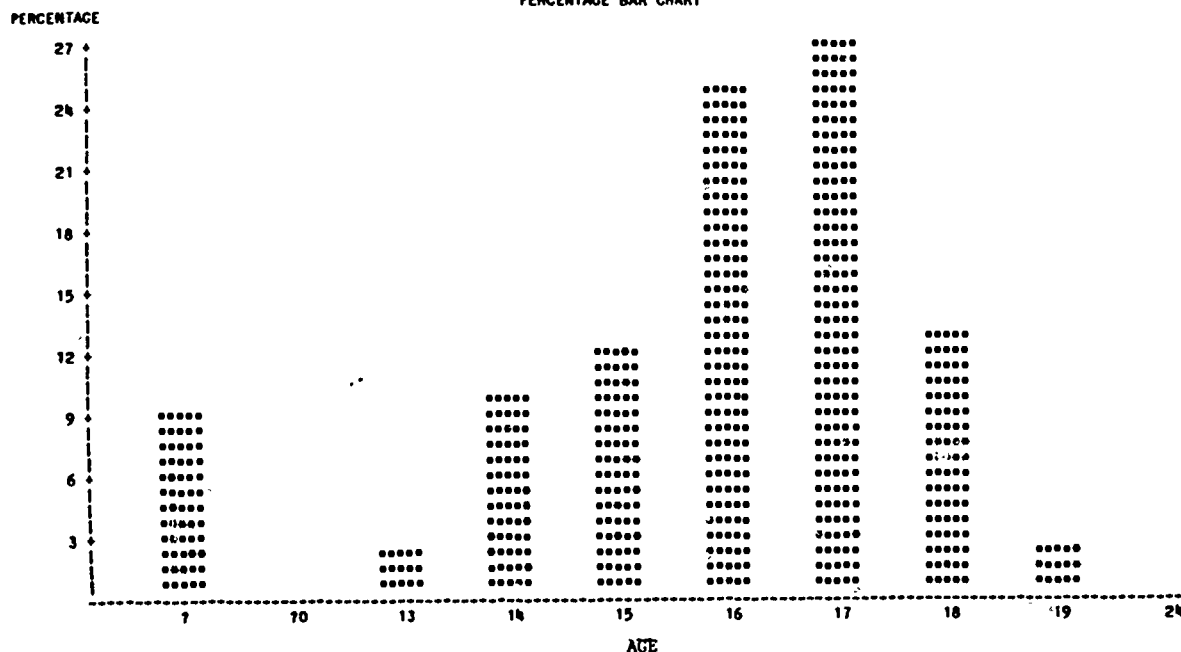
20. What services would you like to see offered to the teen parents at your school or in your community? What services would you like to see offered for the mother of your child?

21. What services would have helped you stay in school? If you didn't drop-out of school, what services helped you stay in school?

22. Did you get any support from the school system?

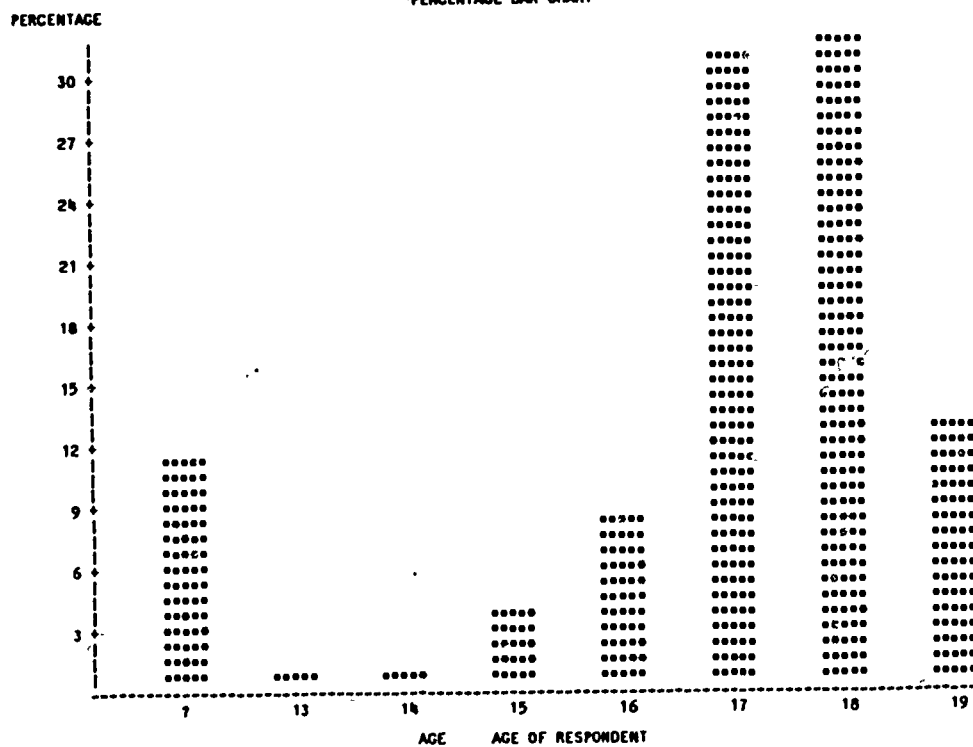
DATA FOR FEMALE RESPONDENTS

PERCENTAGE BAR CHART



DATA FOR MALE RESPONDENTS

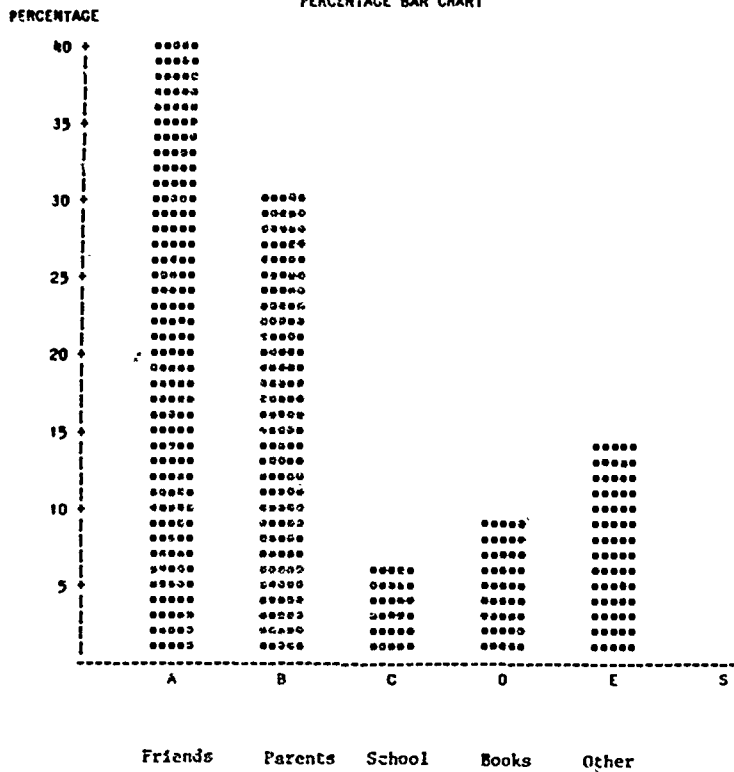
PERCENTAGE BAR CHART



The following are percentages from the 5,000 questionnaires disseminated to Teen Mothers and Fathers, who voluntarily participated in this project. These questionnaires were sent to Teen Mothers and Fathers in the 67 Louisiana parish and city middle and secondary schools, Charity Hospitals, Parish Health Units, Maternity Homes, Adoption agencies, and alternative programs throughout the state.

DATA FOR FEMALE RESPONDENTS

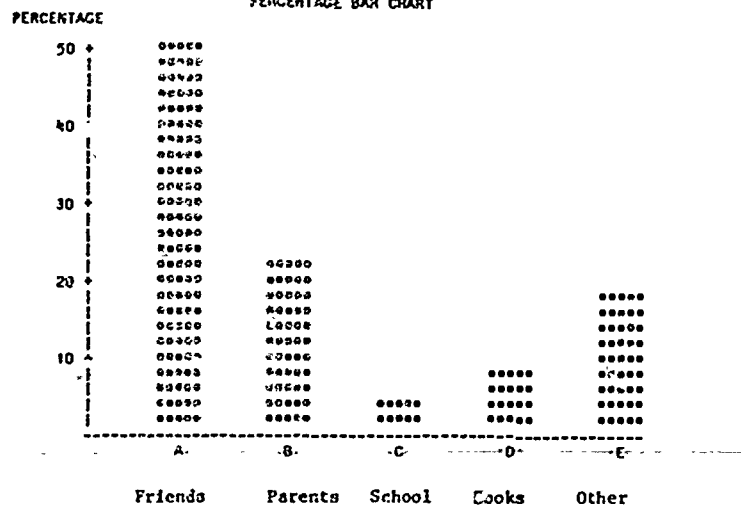
PERCENTAGE BAR CHART



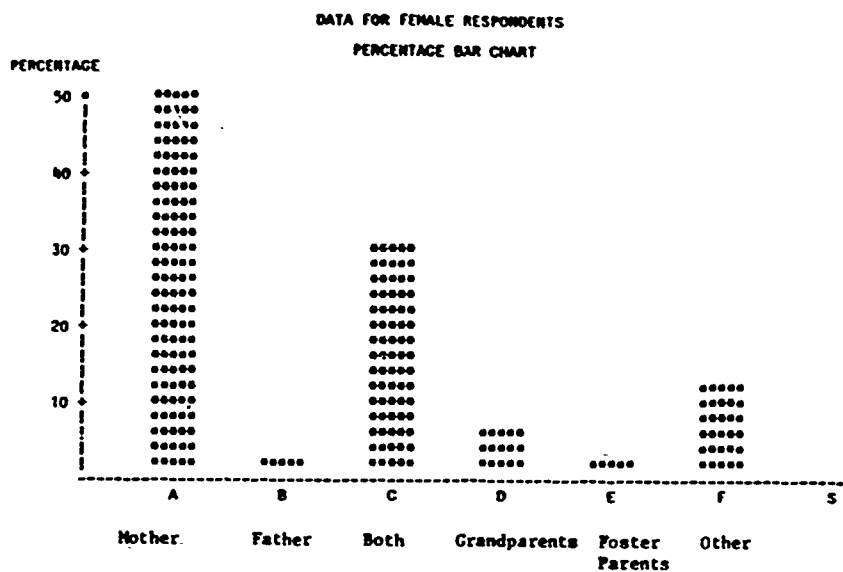
1. What was your major source of sex education?

DATA FOR MALE RESPONDENTS

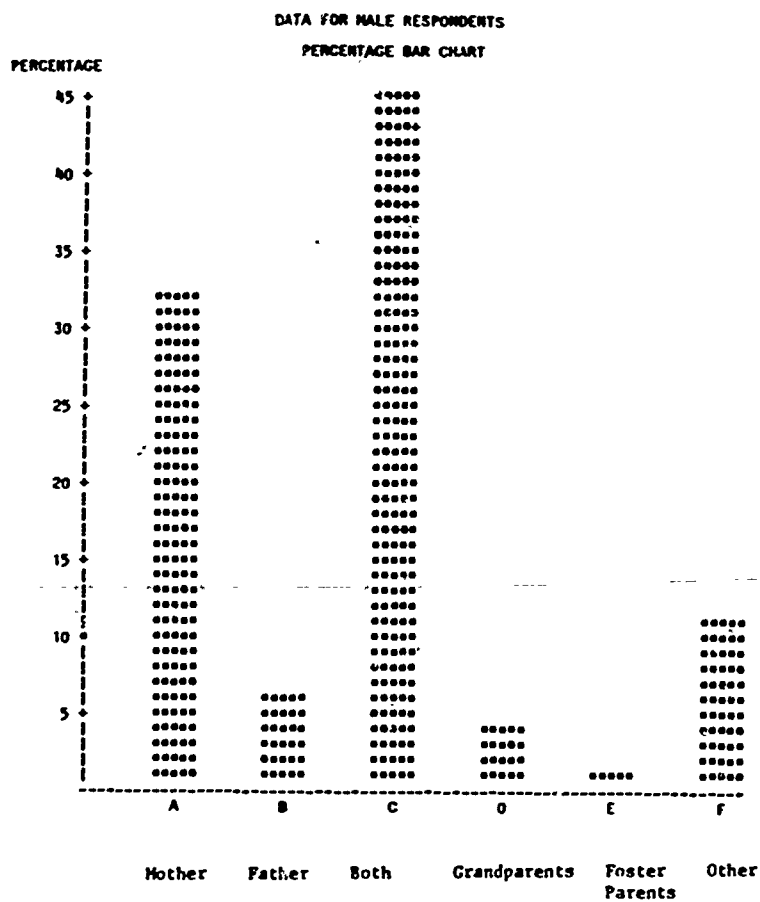
PERCENTAGE BAR CHART



1. What was your major source of sex education?

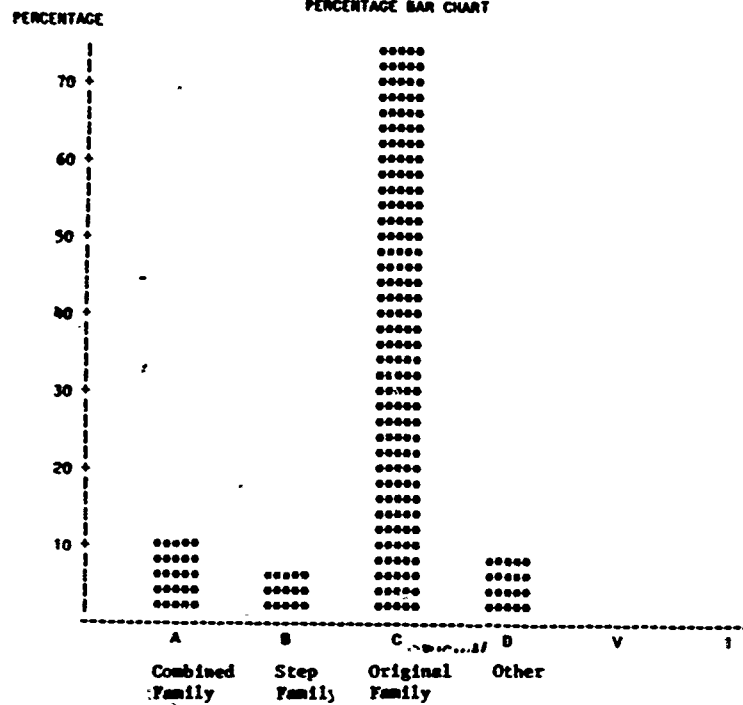


2. Do you live with your:



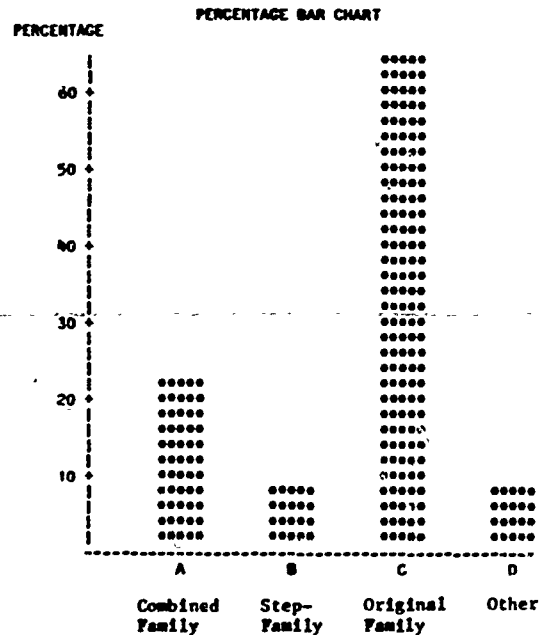
2. Do you live with your:

DATA FOR FEMALE RESPONDENTS



3. Do you live in a:

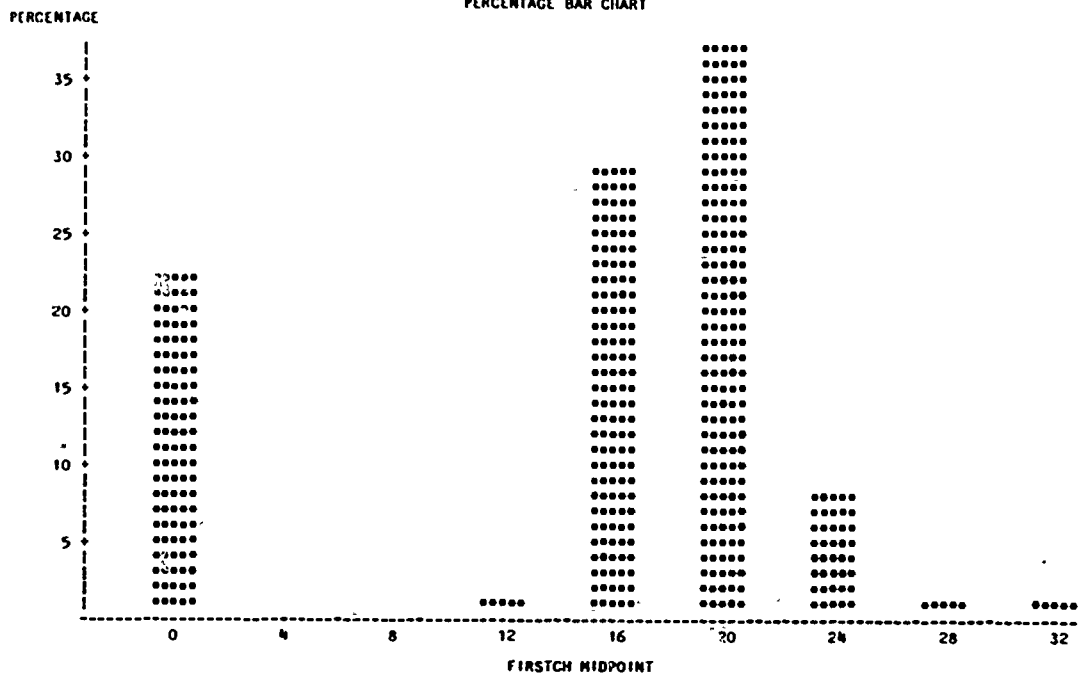
DATA FOR MALE RESPONDENTS



3. Do you live in a:

DATA FOR FEMALE RESPONDENTS

PERCENTAGE BAR CHART



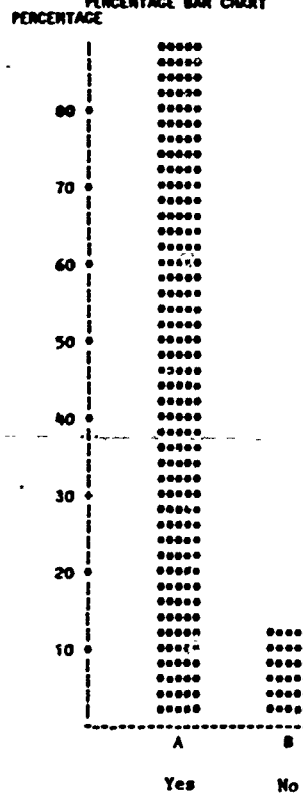
4. At what age did your mother have her first child?

a. Age _____

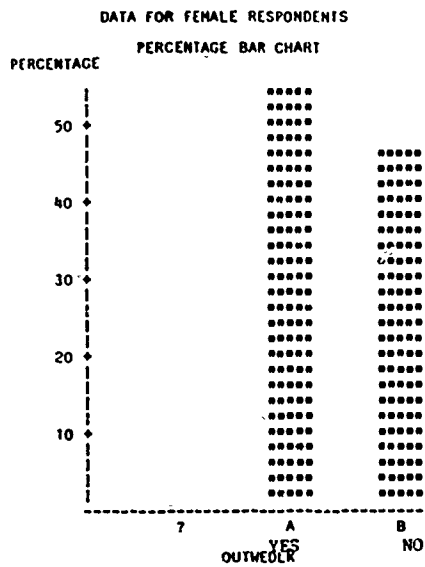
b. Unknown

DATA FOR MALE RESPONDENTS

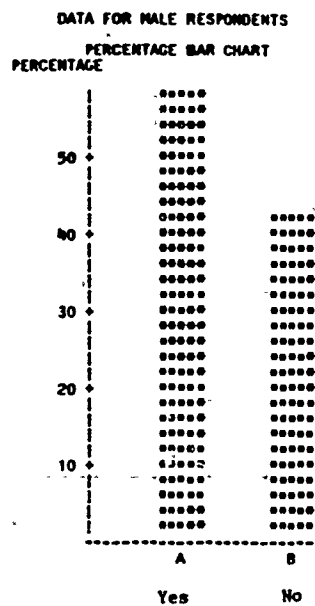
PERCENTAGE BAR CHART



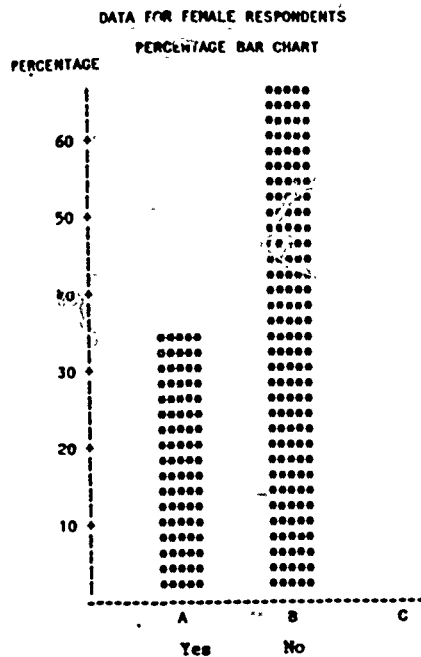
4. Can you talk to your parents?



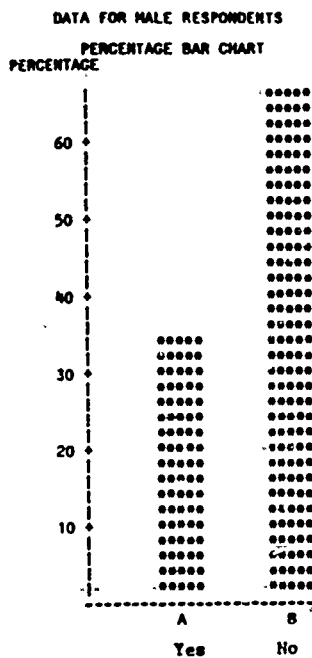
5. Did your mother/father have any children when they were teenagers?
- a. yes
 - b. no



5. Did your mother/father have any children when they were teenagers?

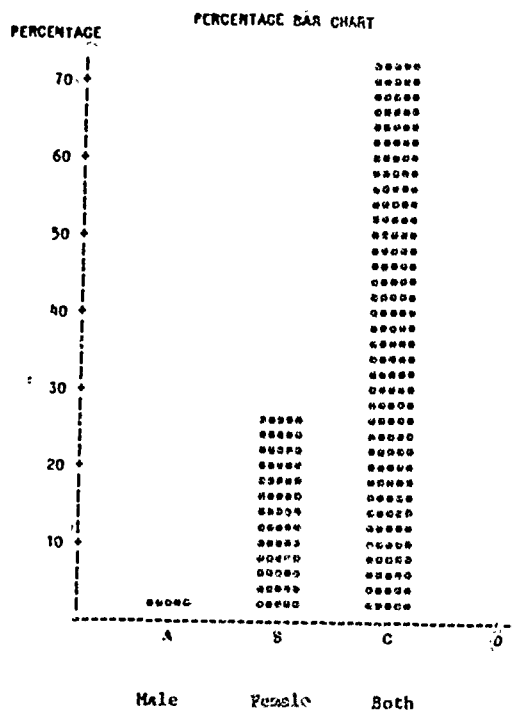


6. Do you have any brothers or sisters who had children when they were teenagers?



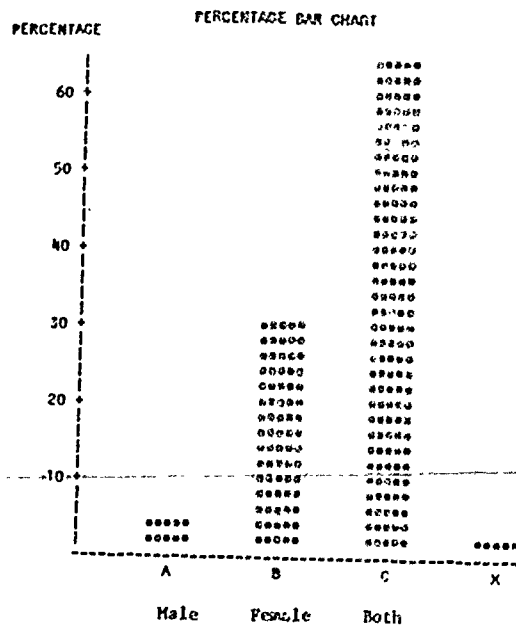
6. Do you have any brothers or sisters who had children when they were teenagers?

DATA FOR FEMALE RESPONDENTS



7. Whom do you feel is responsible for birth control?

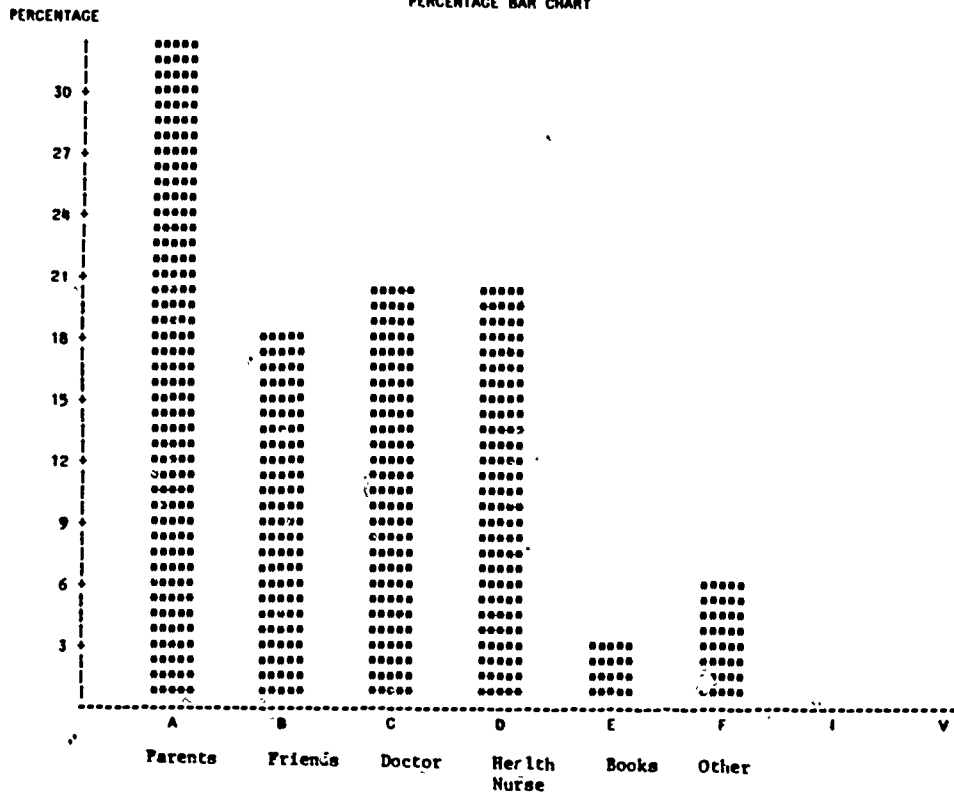
DATA FOR MALE RESPONDENTS



7. Whom do you feel is responsible for birth control?

DATA FOR FEMALE RESPONDENTS

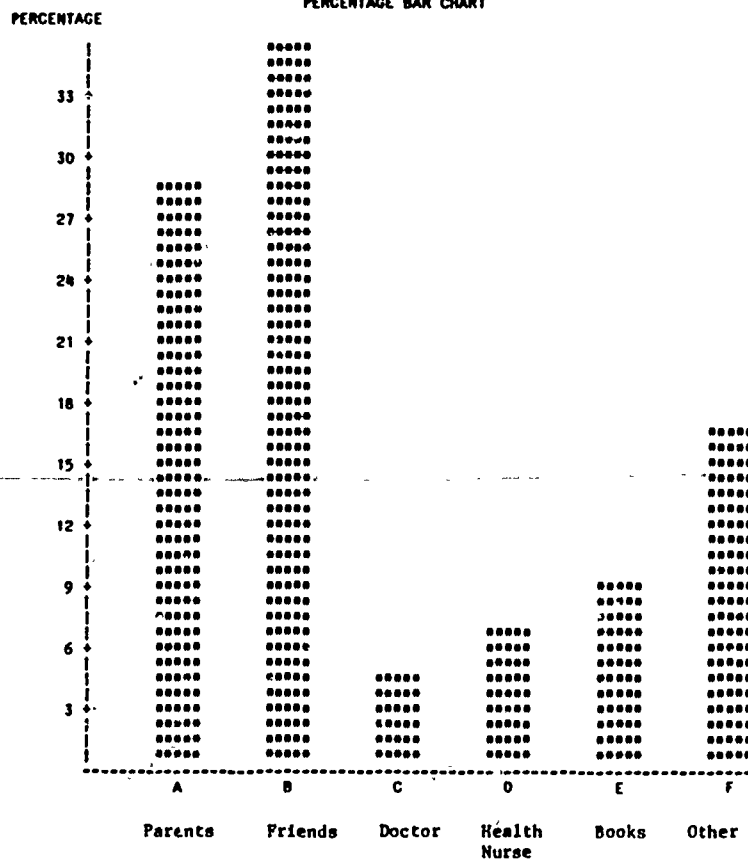
PERCENTAGE BAR CHART



8. Where did you get your information about birth control?

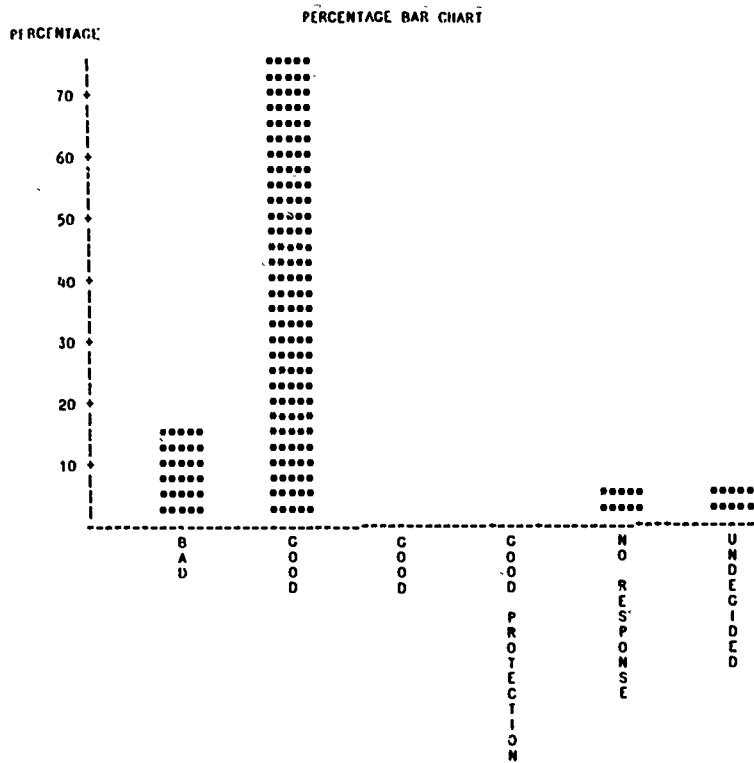
DATA FOR MALE RESPONDENTS

PERCENTAGE BAR CHART

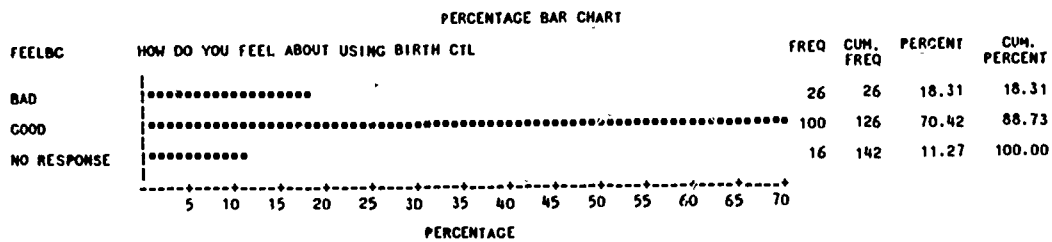


8. Where did you get your information about birth control?

9. how does mother feel about birth control?

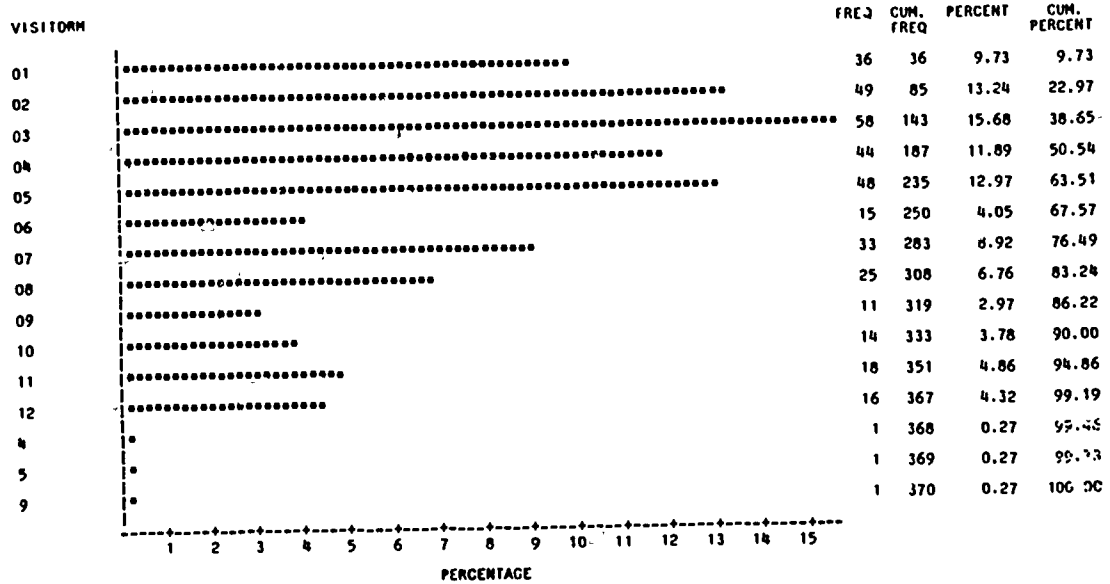


DATA FOR MALE RESPONDENTS



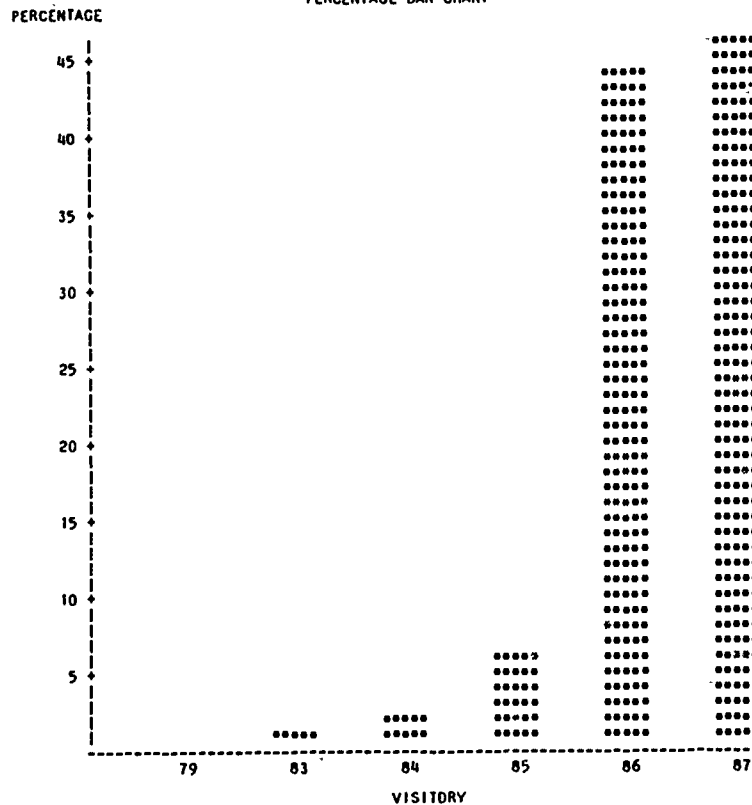
10. When did you first visit your doctor (Month)?

PERCENTAGE BAR CHART

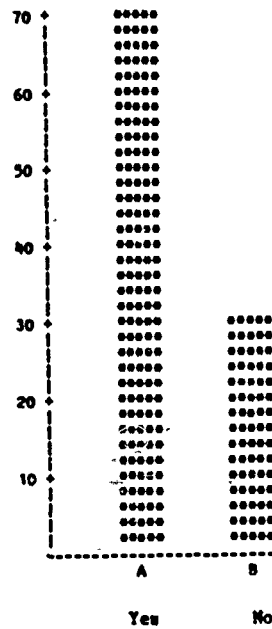


10. When did you first visit your doctor (year)?

PERCENTAGE BAR CHART

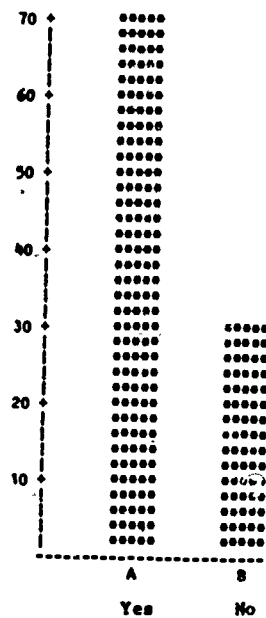


DATA FOR FEMALE RESPONDENTS
PERCENTAGE BAR CHART
PERCENTAGE



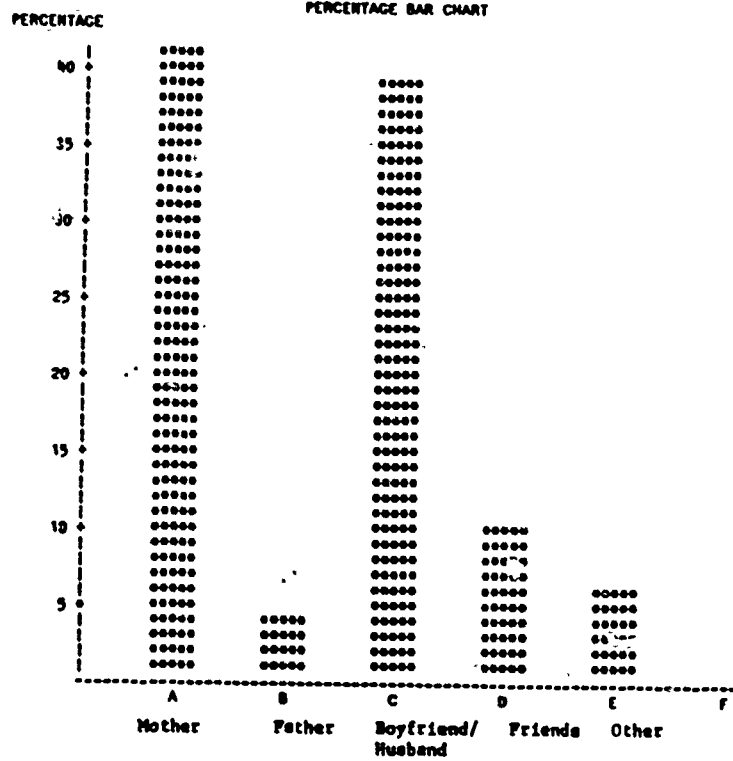
11. Are you still seeing the father of your child?

DATA FOR MALE RESPONDENTS
PERCENTAGE BAR CHART
PERCENTAGE



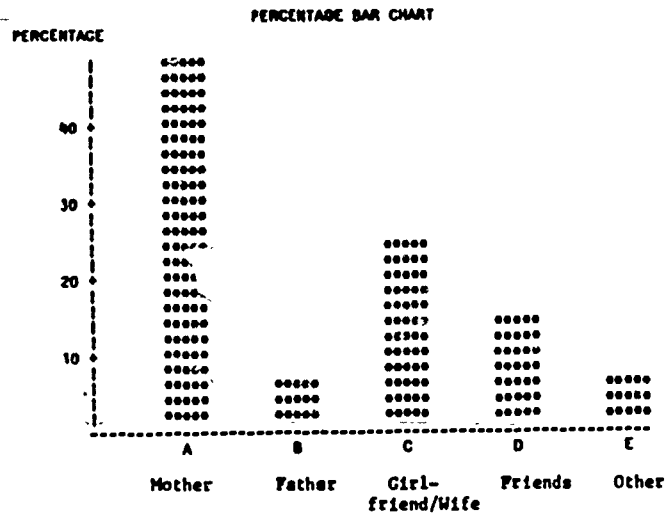
10. Are you still seeing the mother of your child?

DATA FOR FEMALE RESPONDENTS



12. Who gave you the most support:
12-1 Emotionally

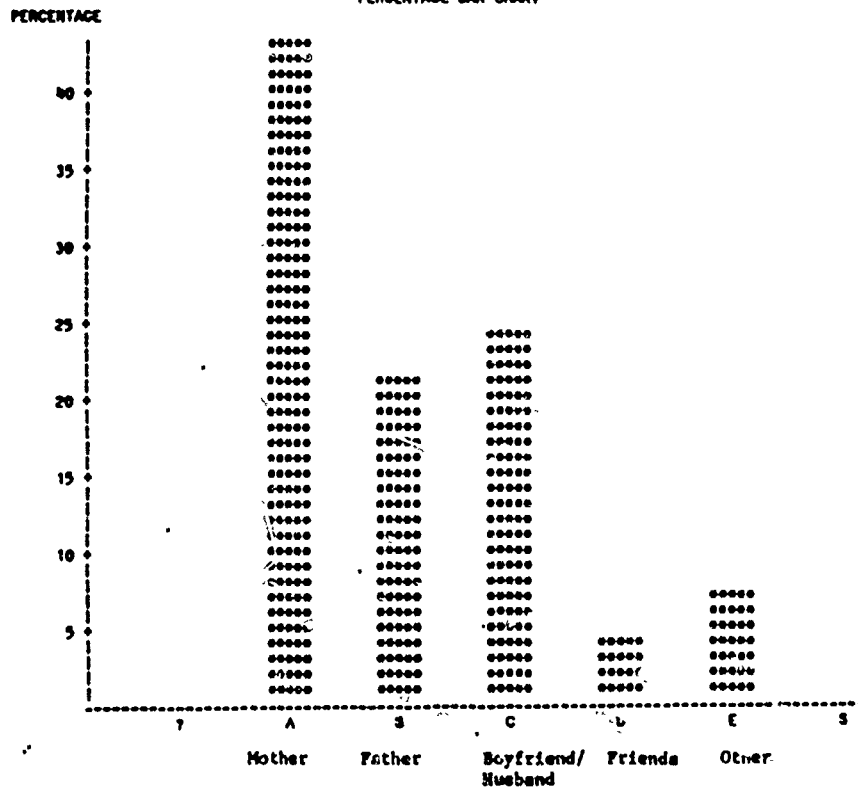
DATA FOR MALE RESPONDENTS



11. Who gave you the most support:
11-1 Emotionally

DATA FOR FEMALE RESPONDENTS

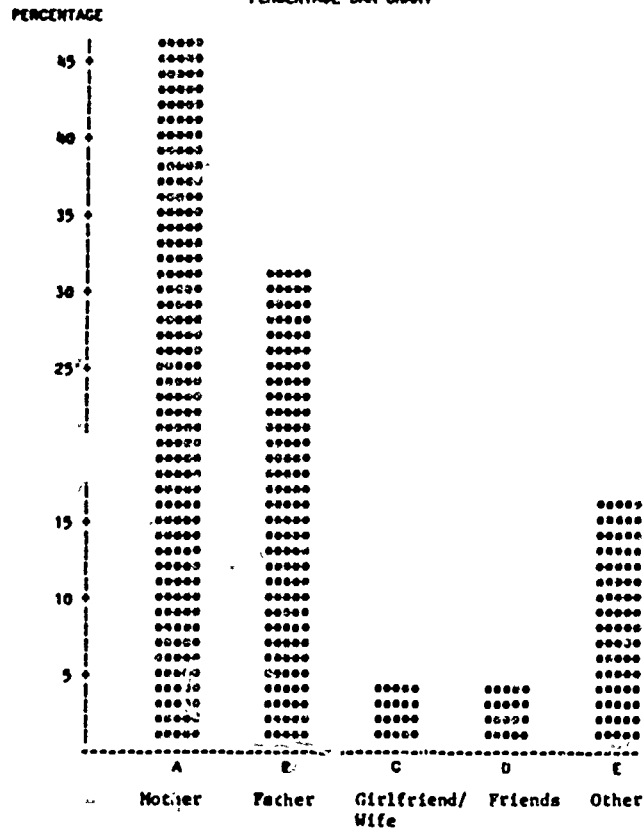
PERCENTAGE BAR CHART



12-2 Financially

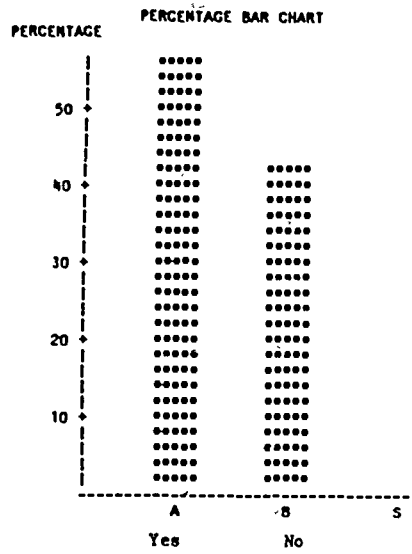
DATA FOR MALE RESPONDENTS

PERCENTAGE BAR CHART



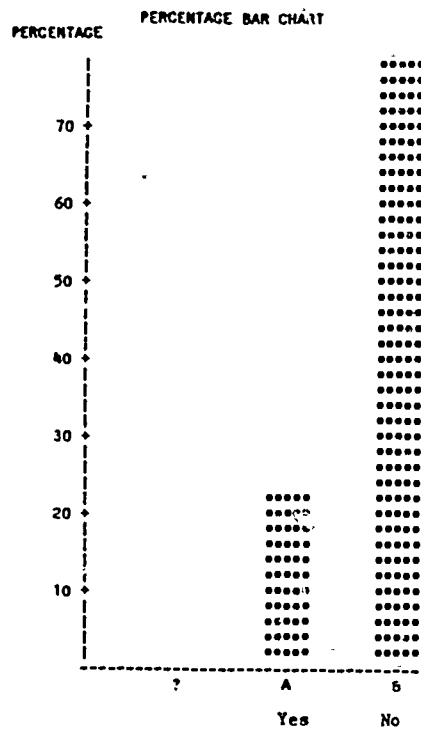
11-2 Financially

DATA FOR FEMALE RESPONDENTS



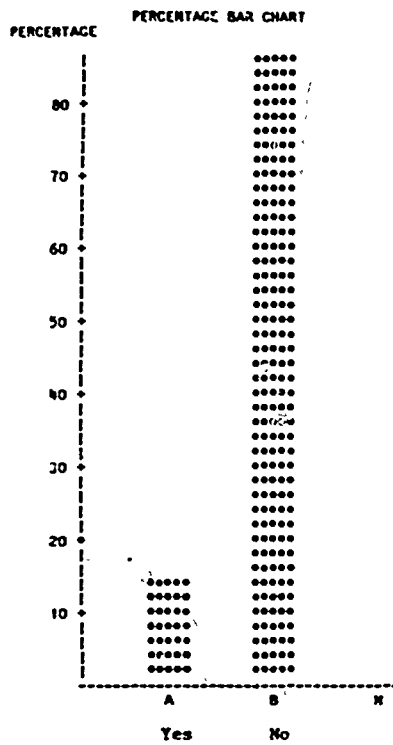
13. Have you received any counseling during the pregnancy or after the birth of your baby?

DATA FOR MALE RESPONDENTS



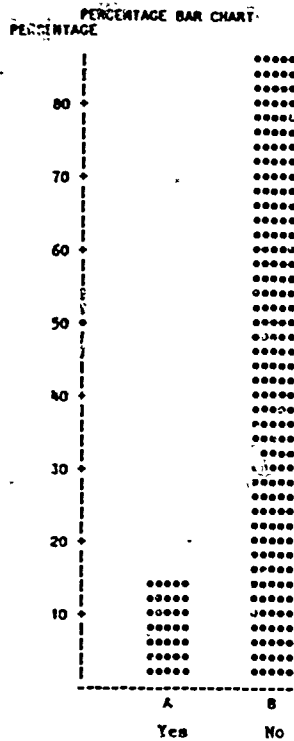
12. Have you received any counseling during the pregnancy or after the birth of your baby?

DATA FOR FEMALE RESPONDENTS



14. Have you received any support from your school in the areas of:
14-A Attendance

DATA FOR MALE RESPONDENTS

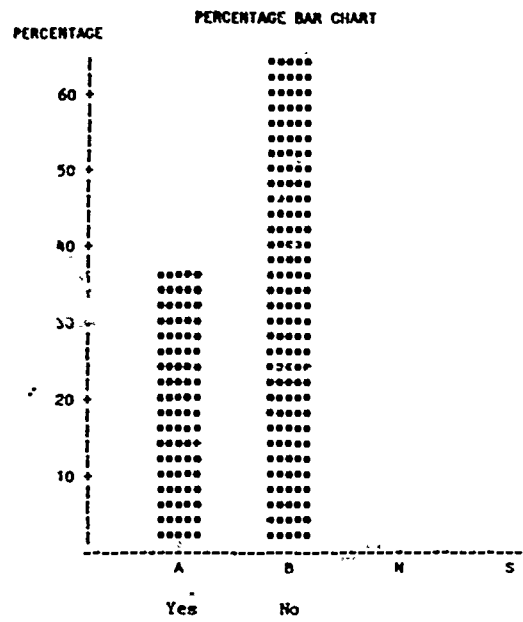


13. (A) Attendance

Have you received any support from your school
in the areas of:

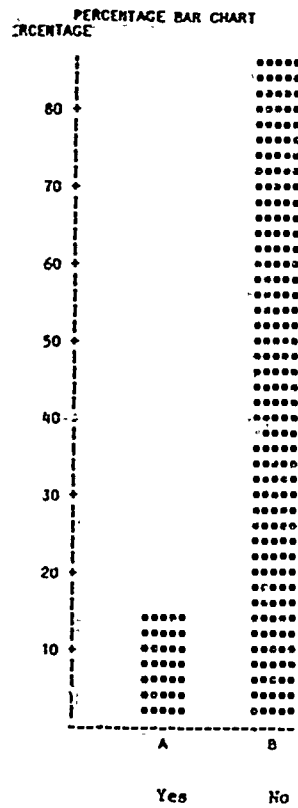
63
70

DATA FOR FEMALE RESPONDENTS

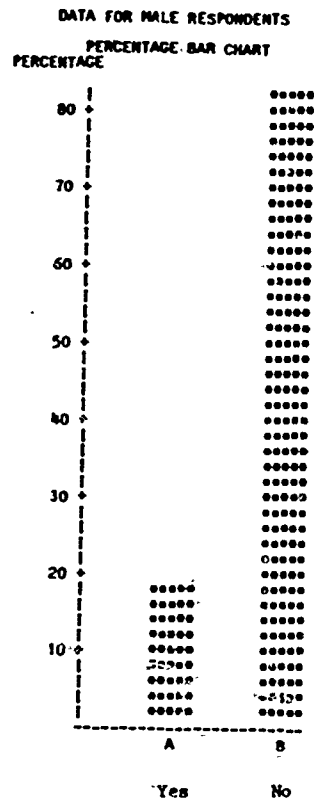
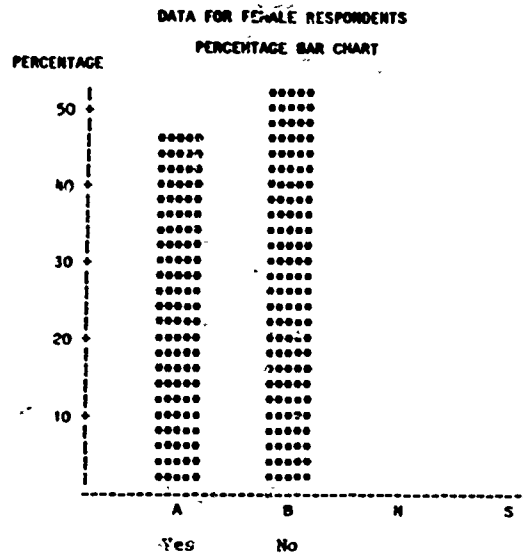


14-B Health Care

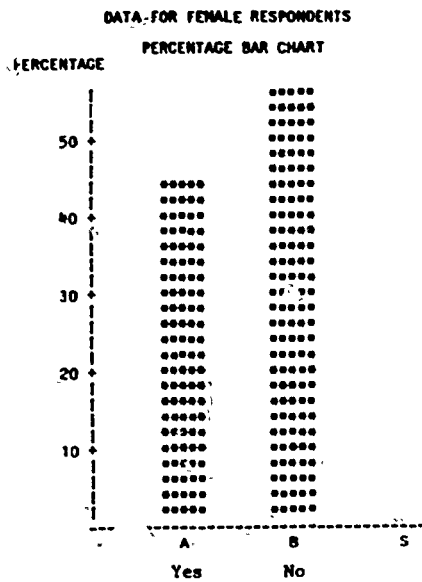
DATA FOR MALE RESPONDENTS



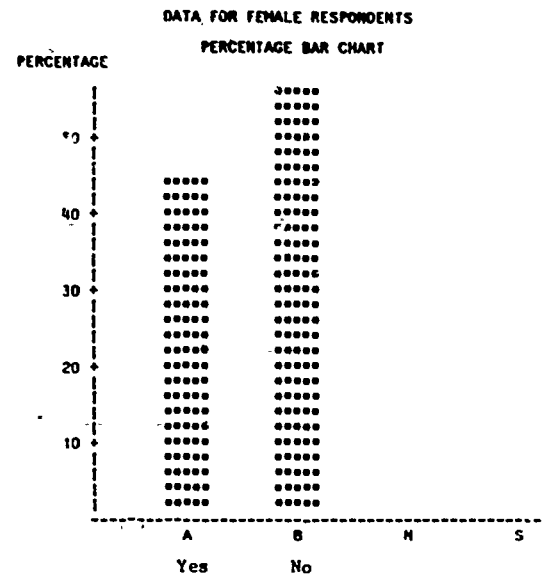
13. (B) Health Care



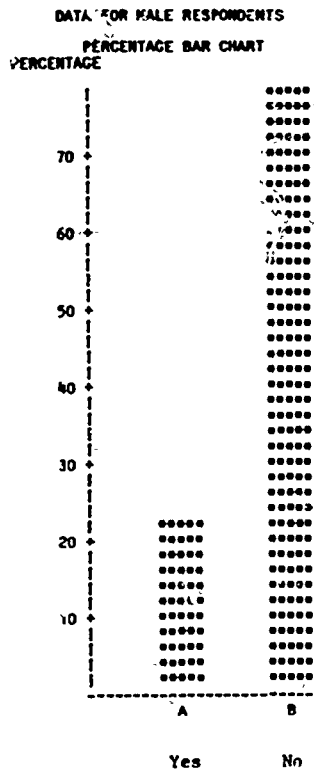
72



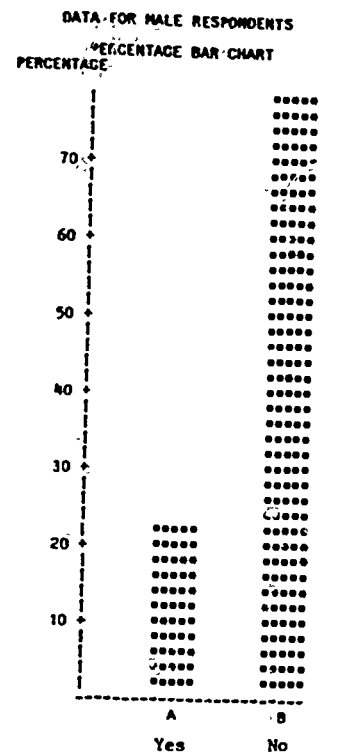
14-D Counseling Services



14-E Employment Assistance

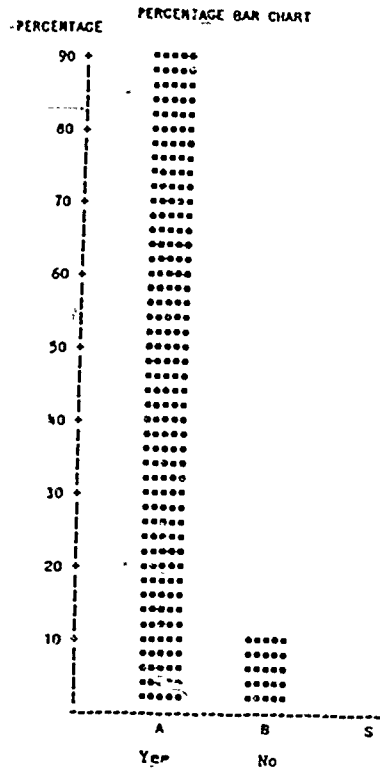


13. (D) Counseling Services



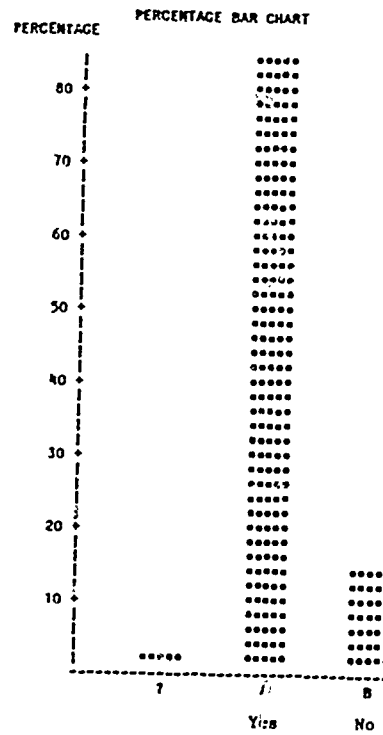
13. (E) Employment Assistance

DATA FOR FEMALE RESPONDENTS



15. Are you still attending regular school? If not, are you in a special school?

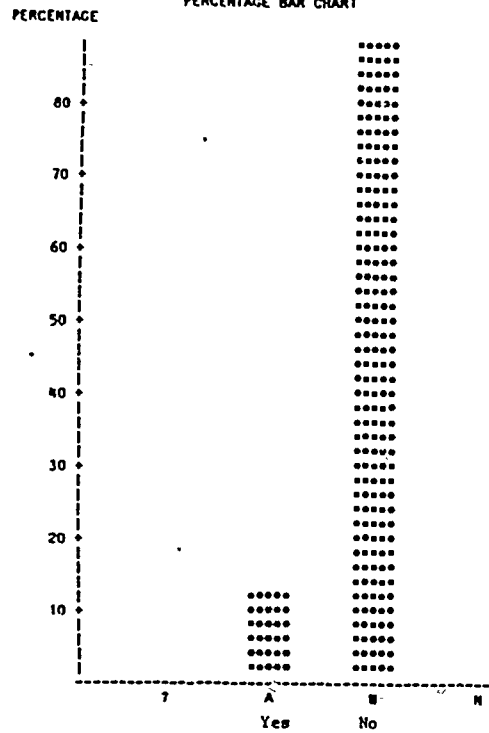
DATA FOR MALE RESPONDENTS



14. Are you still attending regular school?

DATA FOR FEMALE RESPONDENTS

PERCENTAGE BAR CHART

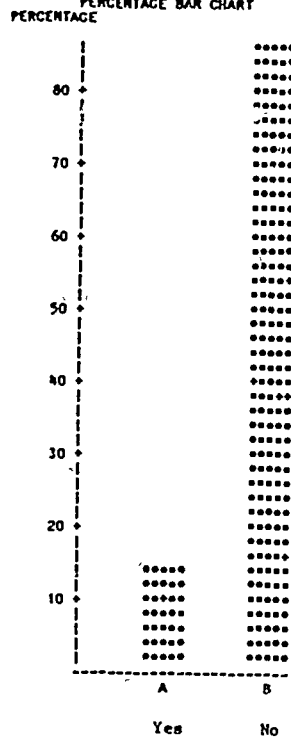


16. What do you plan to obtain?

16-A GED

DATA FOR MALE RESPONDENTS

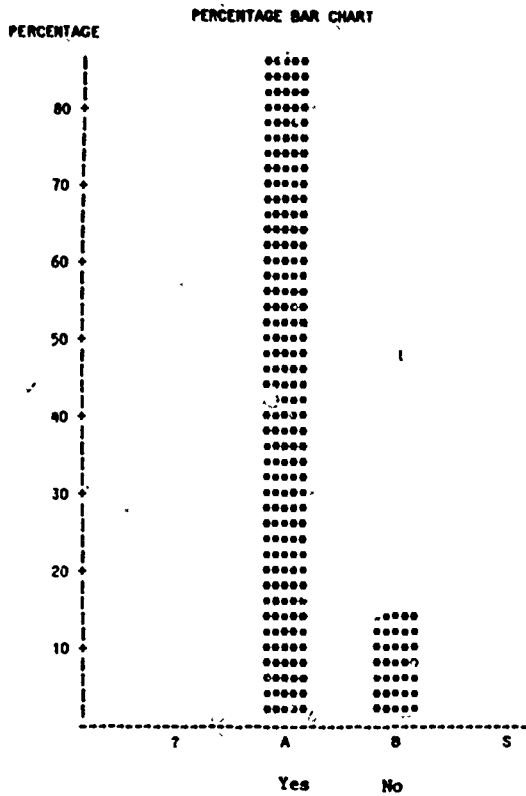
PERCENTAGE BAR CHART



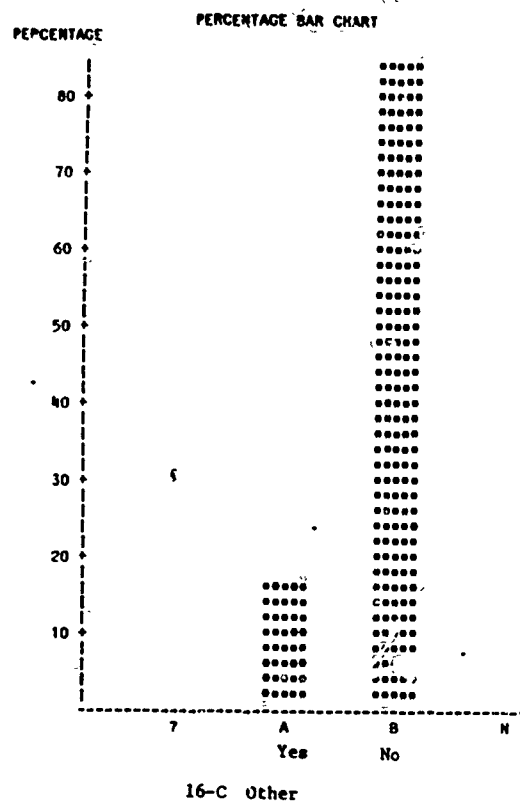
15. What do you plan to obtain?

(A) GED

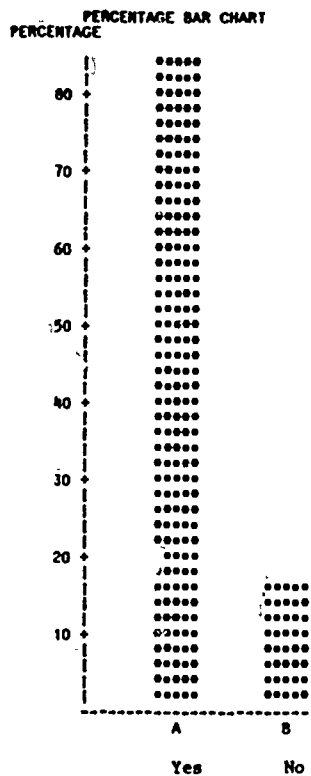
DATA FOR FEMALE RESPONDENTS



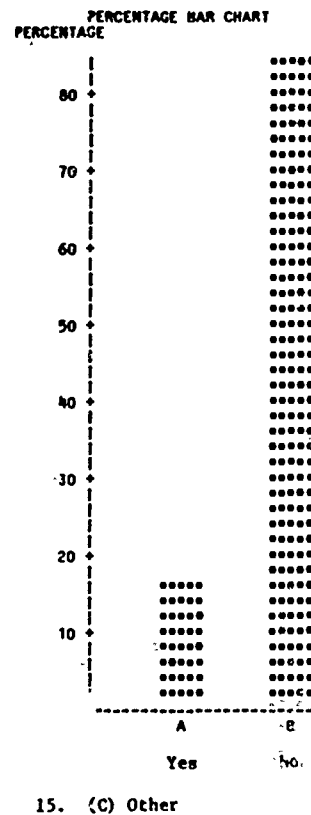
DATA FOR FEMALE RESPONDENTS



DATA FOR MALE RESPONDENTS

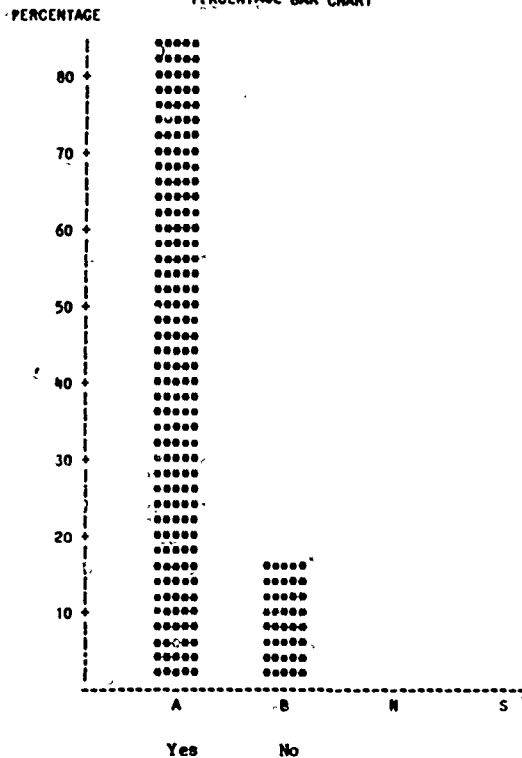


DATA FOR MALE RESPONDENTS



DATA FOR FEMALE RESPONDENTS

PERCENTAGE BAR CHART

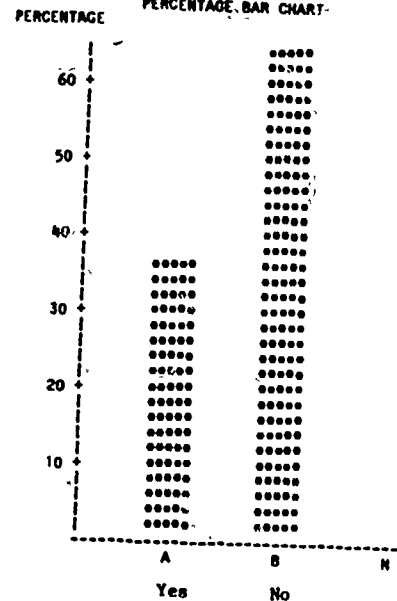


17. Are you able to talk to your parents about your pregnancy?

17-1 Mom

DATA FOR FEMALE RESPONDENTS

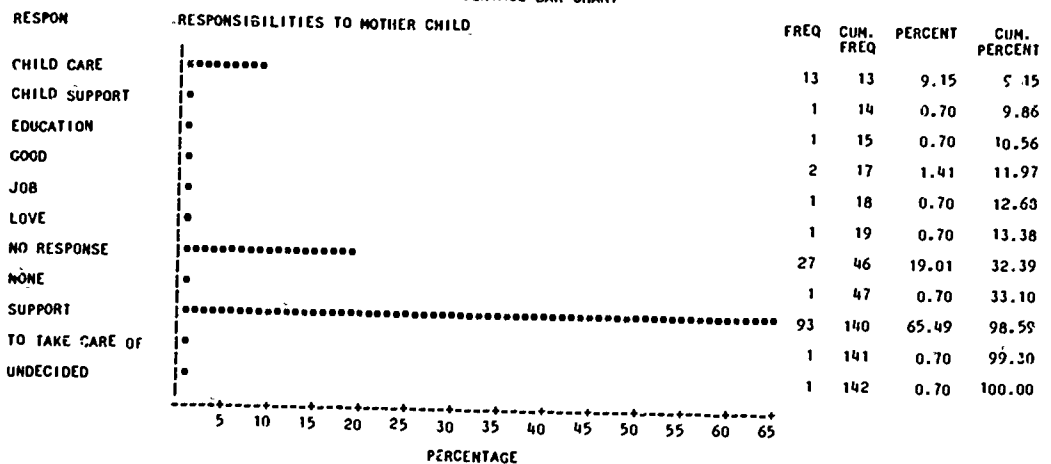
PERCENTAGE BAR CHART



17-2 Dad

DATA FOR MALE RESPONDENTS

PERCENTAGE BAR CHART

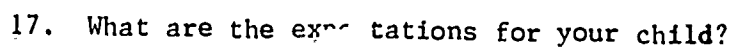


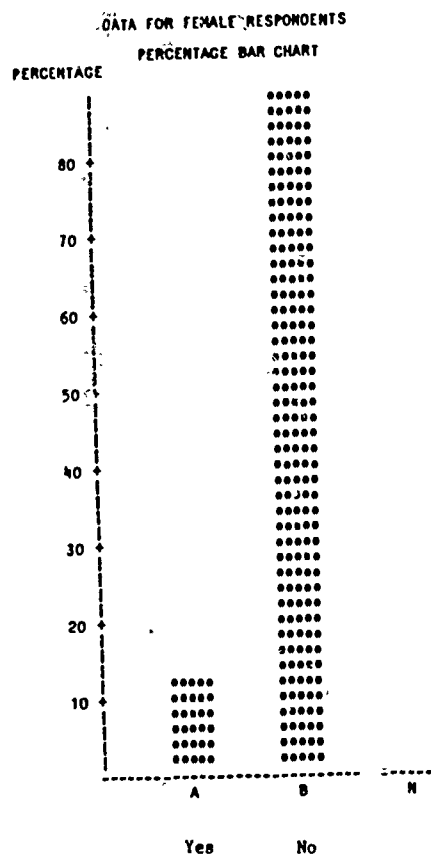
16. What do you feel are your responsibilities to the mother of your child and the child?

PERCENTAGE BAR CHART

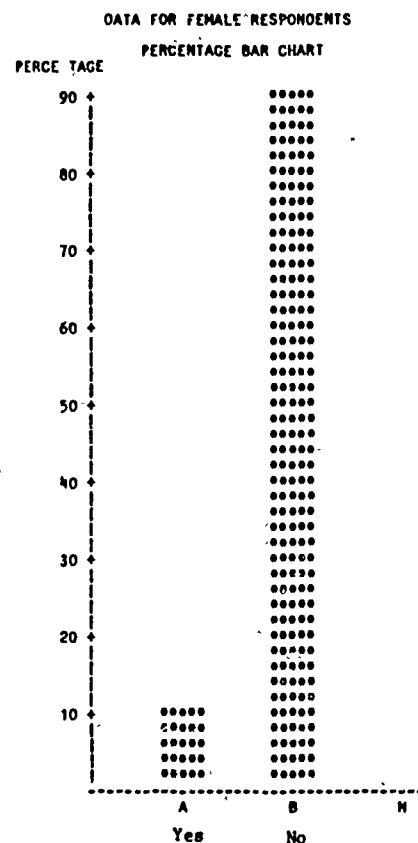


PERCENTAGE BAR CHART

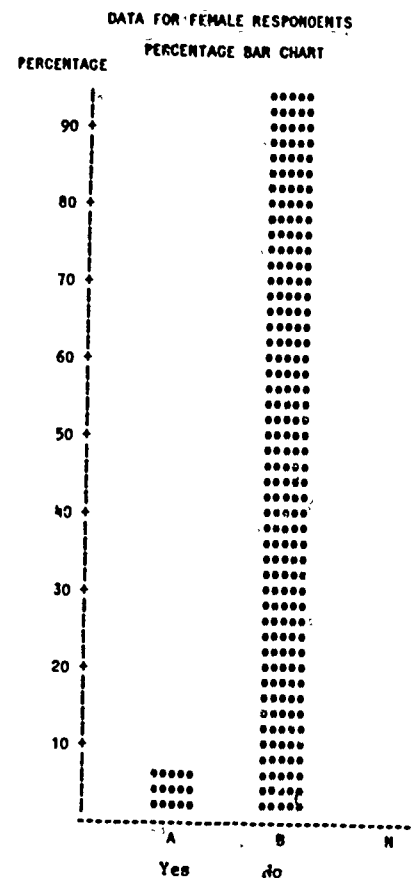




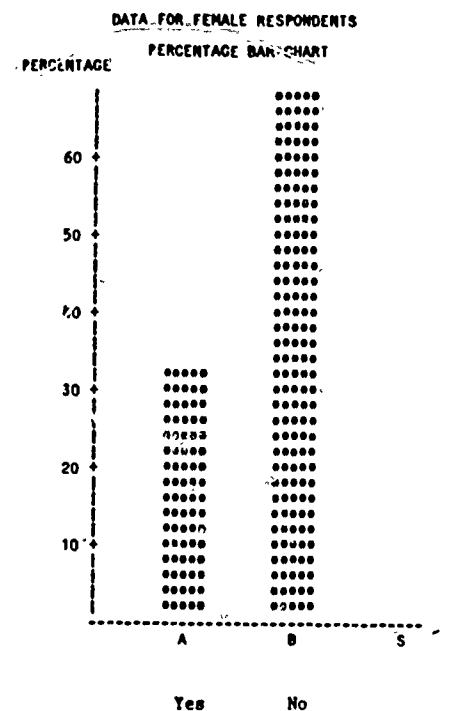
19. Do you...
19-1 Smoke



19-2 Drink



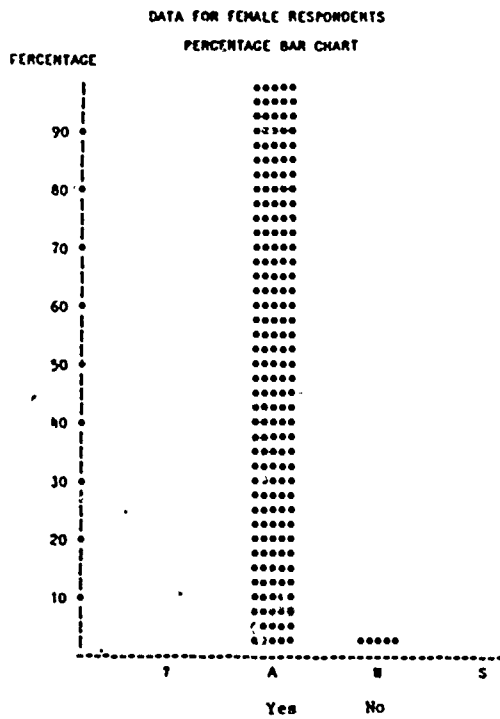
19-3 Use non prescription drugs



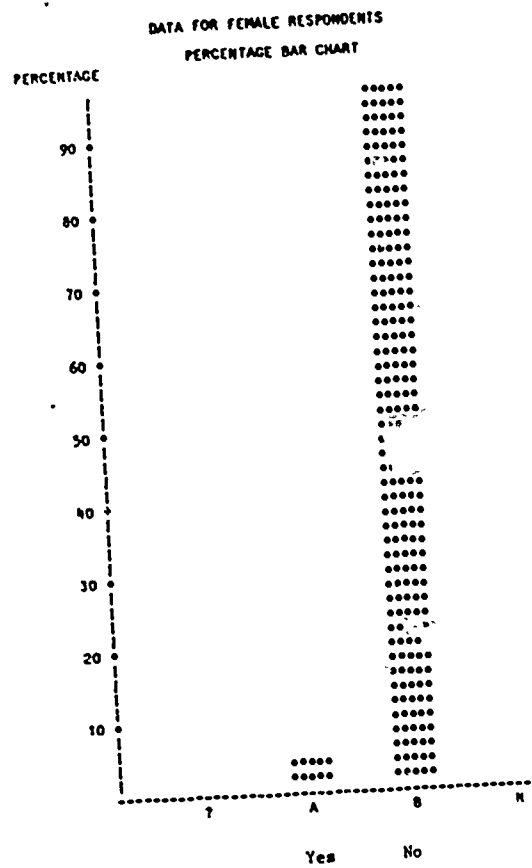
20. Are you following a prenatal diet?

79

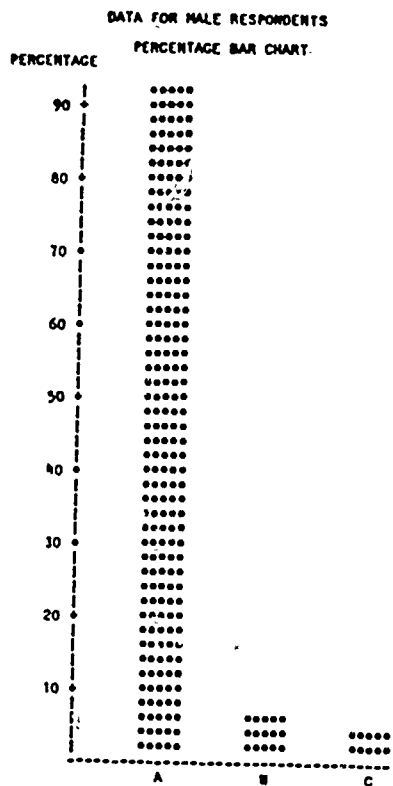
80



21. Are you going to keep your baby?



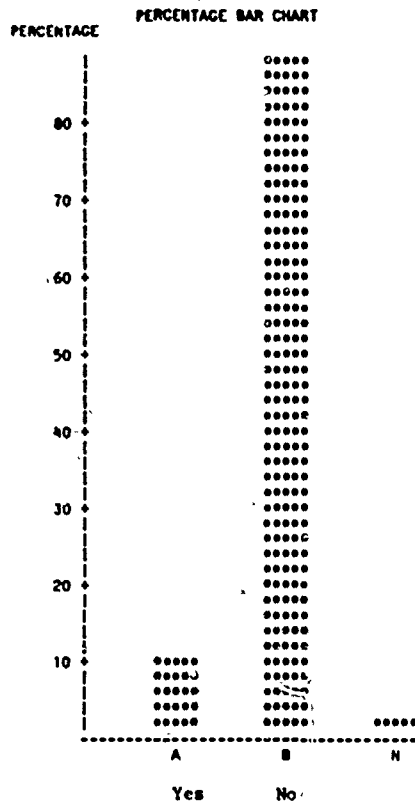
22. Are you going to place your child up for adoption?



19. Did you want the mother of your child to have...

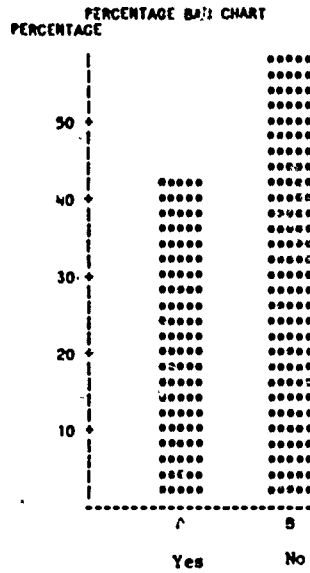
- a. The baby
- b. An abortion 73
- c. The baby placed with adoptive parents

DATA FOR FEMALE RESPONDENTS



24. Are you employed?

DATA FOR MALE RESPONDENTS



18. Are you employed?

DATA FOR MALE RESPONDENTS

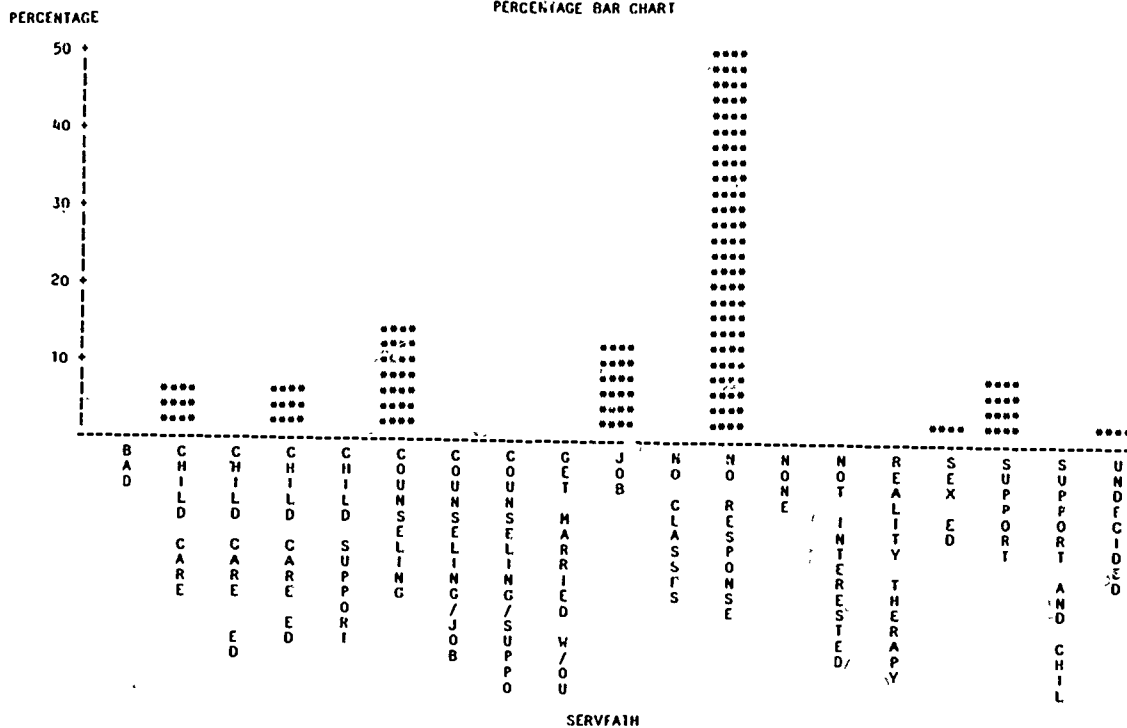
PERCENTAGE BAR CHART

18. Are you employed?				
	FREQ	CUM. FREQ	PERCENT	CUM. PERCENT
A	60	60	43.48	43.48
B	78	138	56.52	100.00

3 6 9 12 15 18 21 24 27 30 33 36 39 42 45 48 51 54

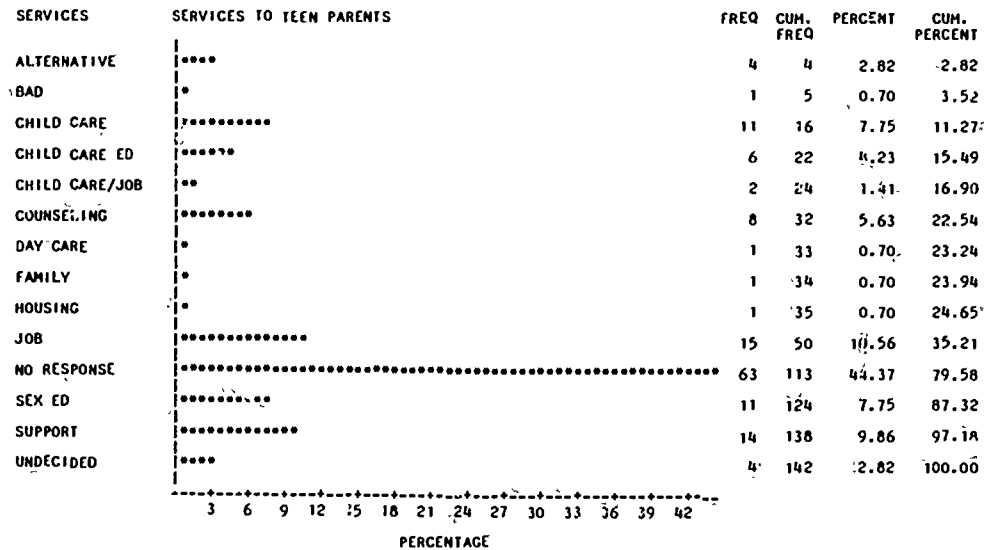
PERCENTAGE

WHAT SERVICES WOULD LIKE SEE OFFERED?
what services would you like to see offered for father and child?

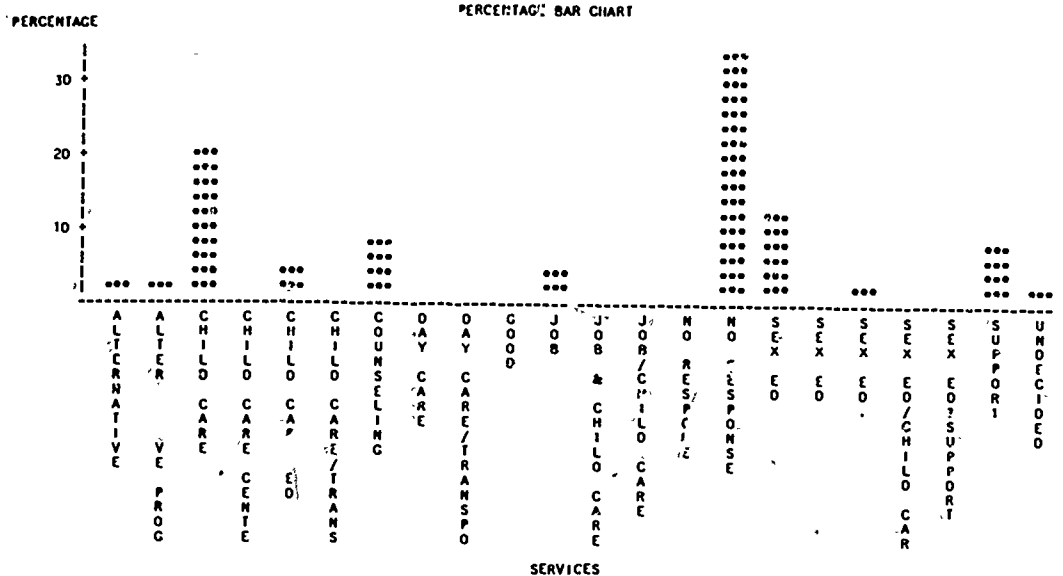


DATA FOR MALE RESPONDENTS

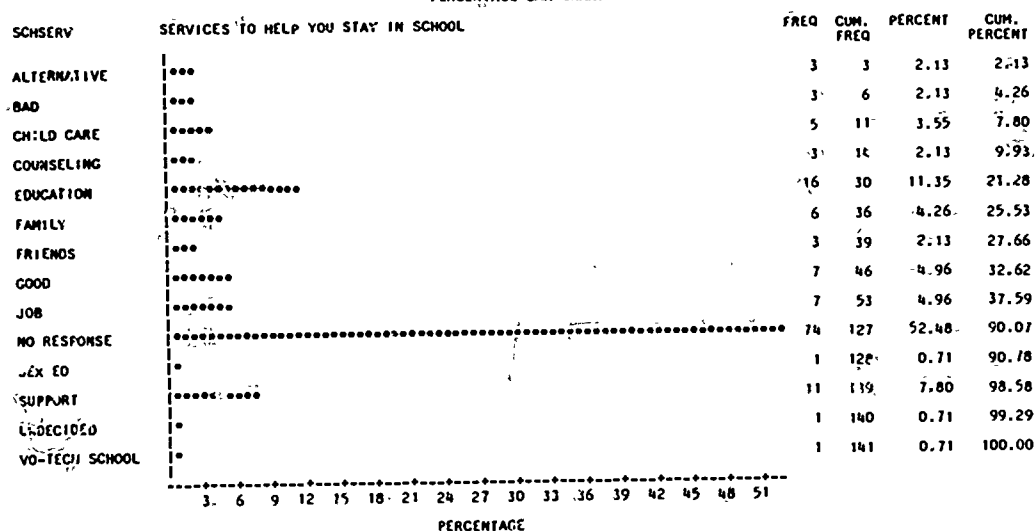
PERCENTAGE BAR CHART



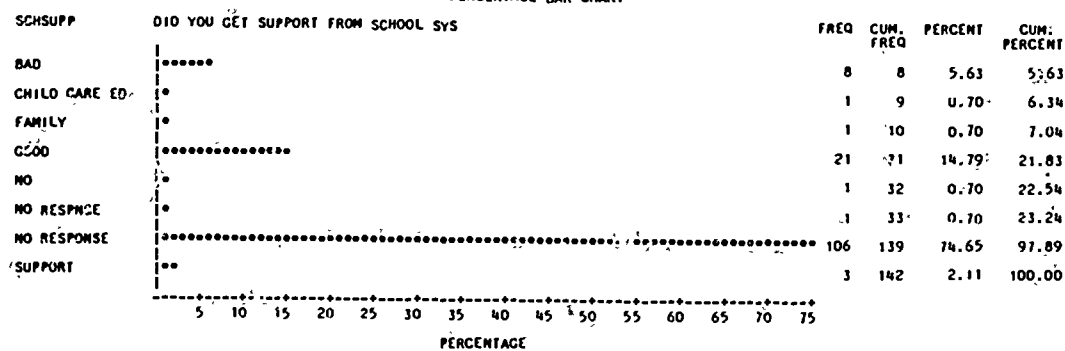
PERCENTAGE BAR CHART



PERCENTAGE BAR CHART



PERCENTAGE BAR CHART



PROJECT TEEN
TASK FORCE MEMBERS

Ms. Mary L. Landrieu
State Treasurer Elect

Dr. Jewel Prestage, Dean
College of Public Administration
Southern University

Dr. Eva Fields, Department Head
Home Economics
Southern University

Dr. William Gill, Chairman
Healthy Mothers/Healthy Babies
Head of Neonatology
Tulane Medical Center

Mr. Todd Lee
Bat. Rouge March of Dimes
Birth Defects Foundation

Mrs. Eleanor Shirley
Office of Women's Services

Dr. Jimmy Guidry
Director of Adolescent Services
Earl K. Long Hospital

Mr. Richard M. Thompson, Director
Bureau of Student Services
Louisiana Department of Education

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Ms. Tracey Peyton
Teen Mother

Ms. Pamela Tapling
Teen Mother

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School of Social Work
Louisiana State University

Dr. Alice R. Geoffray, Director
Area IV, Senior High Schools
Orleans Parish School System

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